

**AGENDA
CITY COUNCIL
AUGUST 15, 2017**

NOTICE:

AUGUST 15, 2017

- 5:30-6:00 P.M. POLICE COMMITTEE MEETING**
6:00-6:30 P.M. INSURANCE COMMITTEE MEETING
- 6:30-6:45 P.M. TOWNSHIP PUBLIC HEARING**

**TOWNSHIP MEETING
AUGUST 15, 2017**

- 1. PRAYER-**
- 2. PLEDGE OF ALLEGIANCE**
- 3. ROLL CALL**
- 4. TOWNBOARD MINUTES- AUGUST 1, 2017**
- 5. PRESENTATION OF COMMUNICATIONS:**
- 6. FINANCE: RON SIMPSON, CHAIRMAN**
 - A. TOWN BUDGET AND APPROPRIATION ORDINANCE**
 - B. TAX LEVY-TOWN OF GRANITE CITY**
 - C. BILL LIST- AUGUST 15, 2017**

**CITY COUNCIL MEETING
AUGUST 15, 2017**

- 1. ROLL CALL**
- 2. CITY COUNCIL MINUTES-AUGUST 1, 2017**
- 3. SPECIAL CITY COUNCIL MINUTES-JULY 27, 2017**
- 4. PRESENTATION OF COMMUNICATION**
 - A. APPLICATION TO ADDRESS THE CITY COUNCIL**
 - 1. KRISTEN WATSON-2804 EDWARDS**
- 5. REMARKS BY MAYOR**
- 6. REPORT OF STANDING COMMITTEES:**

DOWNTOWN: NIKKI PETRILLO, CHAIRMAN (CITY HALL & BUILDINGS)

A.

PLANNING/ZONING, ANNEXATIONS, ENGINEERING AND INSPECTIONS: DAN MCDOWELL, CHAIRMAN

A. BUILDING & ZONING REPORT-JULY 2017

LEGAL AND LEGISLATIVE: BOB PICKERELL, CHAIRMAN (CABLE TV, ORDINANCE)

A. JUNEAU ASSOCIATES-ENGINEERING AGREEMENT

PUBLIC WORKS: DON THOMPSON, CHAIRMAN: (STREET AND ALLEY-SANITATION-INSPECTION-TRAFFIC & LIGHTS)

A. ORDINANCE TO PLACE A “CHILDREN AT PLAY” SIGN IN THE VICINITY OF 4019 BRADEN AVE

B. ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS AT 2805 HERBERT STREET, WITHIN THE CITY OF GRANITE CITY, ILLINOIS

C. ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS AT 2912 E 24TH STREET, WITHIN THE CITY OF GRANITE CITY, ILLINOIS

D. ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS AT 2101 CLEVELAND BLVD., WITHIN THE CITY OF GRANITE CITY, ILLINOIS

POLICE COMMITTEE: TIM ELLIOTT, CHAIRMAN

A. MONTHLY REPORT –JULY 2017

B. ORDINANCE AUTHORIZING THE GRANITE CITY HIGH SCHOOL RESOURCE OFFICER, HIGH SCHOOL PROGRAM AGREEMENT FOR THE 2017-18 SCHOOL YEAR

C. ORDINANCE-ADJUDICATION PROCEDURE FOR UNLAWFUL STANDING, PARKING OR CONDITION OF MOTOR VEHICLES UNDER 10-26 AND 10-34 OF CITY CODE

FIRE: WALMER SCHMIDTKE, CHAIRMAN

A. MONTHLY REPORT--JULY 2017

WASTEWATER TREATMENT: BILL DAVIS, CHAIRMAN

A.

INSURANCE AND SAFETY: GERALD WILLIAMS, CHAIRMAN

A. PENDING LITIGATION

B. RISK MANAGEMENT MONTHLY REPORT --8/1/2017

**ECONOMIC DEVELOPMENT AND NEGOTIATIONS: PAUL JACKSTADT,
CHAIRMAN**

A.

FINANCE: RON SIMPSON, CHAIRMAN

**A. RESOLUTION FOR SPECIAL EARLY REDEMPTION CALL
OF REVENUE BONDS ISSUED**

B. PAYROLL-AUGUST 15, 2017

**Report of Officers
Unfinished Business
New Business**

ADJOURNMENT

**CITY COUNCIL
MINUTES
AUGUST 1, 2017**

Mayor Ed Hagnauer called the regular meeting to order of the city council at 7:05 p.m.

ATTENDANCE ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell, Elliott, Clerk Whitaker and Mayor Hagnauer were present.

MOTION By Williams, second by Schmidtke to approve the minutes from the City Council Meeting on July 18, 2017. ALL VOTED YES. Motion carried.

MOTION By Petrillo, second by Elliott to approve the request for street closures and police direction from the Granite City High School for their Annual Granite City Cross Country Invitational on September 2, 2017, under the supervision of the Police and Public Works Department. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Petrillo to approve the request for the Granite City Family Bike Ride on Saturday, October 7, 2017 and Police participation, under the supervision of the Police and Public Works Department. ALL VOTED YES. Motion carried.

MOTION By Pickerell, second by Jackstadt to place on file the Public Hearing Minutes for July 27, 2017. ALL VOTED YES. Motion carried.

MOTION By Elliot, second by McDowell to send back to Police Committee an Ordinance of Adjudication procedure for unlawful standing, parking or condition of motor vehicles under 10.26 and 10.34 of city code.

MOTION By Elliott, second by McDowell to approve the request from the Fire and Police Commissioners to promote Patrolman Karl Shulz to Sergeant due to the retirement of Captain Michael Gagich effective August 5, 2017. ALL VOTED YES. Motion carried.

MOTION By McDowell, second by Elliott to award Captain Michael Gagich with a plaque for his 35 years of service to the City of Granite City. ALL VOTED YES. Motion carried.

MOTION By Schmidtke, second by Thompson to place on file the Granite City Fire Department Monthly Report for June 2017. ALL VOTED YES. Motion carried.

MOTION By Davis, second by Simpson to approve a Resolution to approve bid for Electronic Valve Actuators for Wastewater Treatment Plant Aeration Tanks.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Davis, second by Thompson to approve a Resolution to approve bid for Programming to control Electronic Valve Actuators for Wastewater Treatment Plant Aeration Tanks.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Pickerell to place on file the Insurance & Safety Committee Meeting Minutes from July 18, 2017. ALL VOTED YES. Motion carried.

MOTION By Williams, second by Simpson to give the City Attorneys authorization to settle cases discussed in the Closed Insurance Committee Meeting.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Pickerell and Elliott. VOTED YES. Petrillo ABSTAINED. Motion carried.

MOTION By Jackstadt, second by Petrillo to approve a Resolution authorizing the Office of the Treasurer to release lien on 2804 Edwards St., Granite City, Illinois 62040.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Elliott to approve a Resolution renewing Agreement with Push Media Solutions, to provide social media services to the City of Granite City.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Simpson to apply the Omnibus Rule to approve (Economic Development and Negotiations) items C-G.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Simpson to approve the following Amended Resolutions under the Omnibus Rule:

- 1. Auto Tech-1401 Niedringhaus (\$10,000.00)**
- 2. Daylight Donuts-1965 Madison Ave (\$10,000.00)**
- 3. Icon Mechanical-1603 Cleveland (\$10,000.00)**
- 4. Fort Gondo Inc-1824 State (\$10,000.00)**
- 5. State Street Partnership Trust-1832-34 State St (\$10,000.00)**

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Jackstadt, second by Elliott to place on file the Economic Development Committee Meeting Minutes from July 18, 2017. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Jackstadt to suspend the rules and place on final passage an Ordinance to engage Bond Counsel for issuance of General Obligation Revenue Bonds in 2017. (Firefighter & Police Pension Fund)

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

FINAL PASSAGE: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to approve a Resolution relating to participation by elected officials in the Illinois Municipal Retirement Fund for Alderman.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Williams to approve a Resolution relating to participation by elected officials in the Illinois Municipal Retirement Fund regarding the Mayor, Treasurer and City Clerk.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by McDowell to approve the Bill List for the Month of July 2017 in the amount of \$1,594,712.40.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION By Simpson, second by Davis to approve the Payroll for the period ending July 30, 2017 in the amount of \$666,542.78.

ROLL CALL: McDowell, Davis, Thompson, Schmidtke, Simpson, Jackstadt, Williams, Petrillo, Pickerell and Elliott. ALL VOTED YES. Motion carried.

MOTION by Thompson, second by Schmidtke to adjourn the City Council Meeting at 7:25 p.m. Motion carried.

MEETING ADJOURNED

**ATTEST
JUDY WHITAKER
CITY CLERK**

**SPECIAL CITY COUNCIL MEETING MINUTES
JULY 27, 2017**

Mayor Hagnauer called the Special City Council Meeting to order at 5:00 p.m.

ATTENDANCE ROLL CALL: McDowell, Davis, Thompson, Jackstadt, Williams, Petrillo, Elliott, Deputy Clerk Gracey and Mayor Hagnauer were present. Schmidtke, Simpson, Pickerell where absent.

Motion by McDowell, second by Jackstadt to suspend the rules and place on final passage an Ordinance termed the Combined Annual Budget and Appropriation Ordinance in and for the City of Granite City, Madison County, State of Illinois, for the fiscal year beginning May 1, 2017 and ending April 30, 2018.

ROLL CALL: McDowell, Davis, Thompson, Jackstadt, Williams, Petrillo, Elliott. **ALL VOTED YES. Motion Carried.**

FINAL PASSAGE: McDowell, Davis, Thompson, Jackstadt, Williams, Petrillo, Elliott. **ALL VOTED YES. Motion Carried.**

Motion by Thompson, second by Davis to adjourn the Special City Council Meeting at 5:20 p.m. **ALL VOTED YES. Motion Carried.**

MEETING ADJOURNED

**ATTEST
JUDY WHITAKER
CITY CLERK**



JUDY WHITAKER

CITY CLERK

RECEIVED
JUDY WHITAKER

AUG 13 2017

Judy Whitaker, City Clerk
2000 Edison Avenue
Granite City, IL 62040

Office: (618) 452-6200
Fax: (618) 452-0847

APPLICATION TO ADDRESS THE COUNCIL

I request permission from the Mayor and City Council of
The City of Granite City, Illinois, to address the City Council
Meeting of Aug 20 17. I understand this
application must be filed with the City Clerk's Office by 3:00
p.m. on Thursday preceding Council meeting.

Describe in detail all subjects to be discussed:

Remove leins - (2804 Edwards St)
Rezone to Zone 5
and talk about sewer that they poured.

I am/am (circle one) currently in any litigation, arbitration, or
any pending civil suit involving the City of Granite City, any of its
officers, agents, or employees.

Speaking time allotted for each request is three (3) minutes. I
understand the City Council must vote whether to allot me speaking
time, and that my public appearance before the Council may be
televised.

Signature of Party seeking to address City Council

Name/Printed

Address

City

State

Zip

Phone Number

property 2804 Edwards granite city St.

I would like to talk to council about

Re-zoning this property to the property of 2406 Namurki Rd.

The properties are right next to each other.

When Steve and I looked up the property we found out that there is a sewer going thru the property. So I'm wanting to ask permission if that is possible to work with as well.



City of Granite City

Inspection Department 2000 Edison, Ground Floor Granite City, IL 62040 Phone:(618) 452-6218 Fax:(618) 452-6246

MONTHLY REPORT TO CITY COUNCIL

BUILDING & ZONING DEPARTMENT

AUG - 2 2017

JULY 2017 REPORT

The Building & Zoning Department no longer issues free permits for charities; tax exempt organizations or governing bodies. The number of permits sold will not necessarily reflect the number of inspections required.

JULY 2017 Permits

Building Permits	124	\$	4,357.00
Electrical Permits	109	\$	5,495.00
Mechanical Permits	57	\$	2,885.00
Plumbing Permits	48	\$	2,928.00
Occupancy Permits	123	\$	4,400.00
Fence Permits	13	\$	480.00
Sewer Permits	4	\$	295.00
Razing Permits DEMO	1	\$	40.00
Excavating Permits	7	\$	540.00
SIGN Permits	2	\$	130.00
HARC	0	\$	-
Planning & Zoning	0	\$	-
Board of Appeals	0	\$	-
Graphic Review	0	\$	-
Plan Review	1	\$	100.00
Finger Print Processing	20	\$	1,075.00
SHORT/OVER	0	\$	-
(Stationary Eng. Renewals)	3	\$	30.00
Oversize Load	1	\$	30.00
TOTALS	513	\$	22,785.00

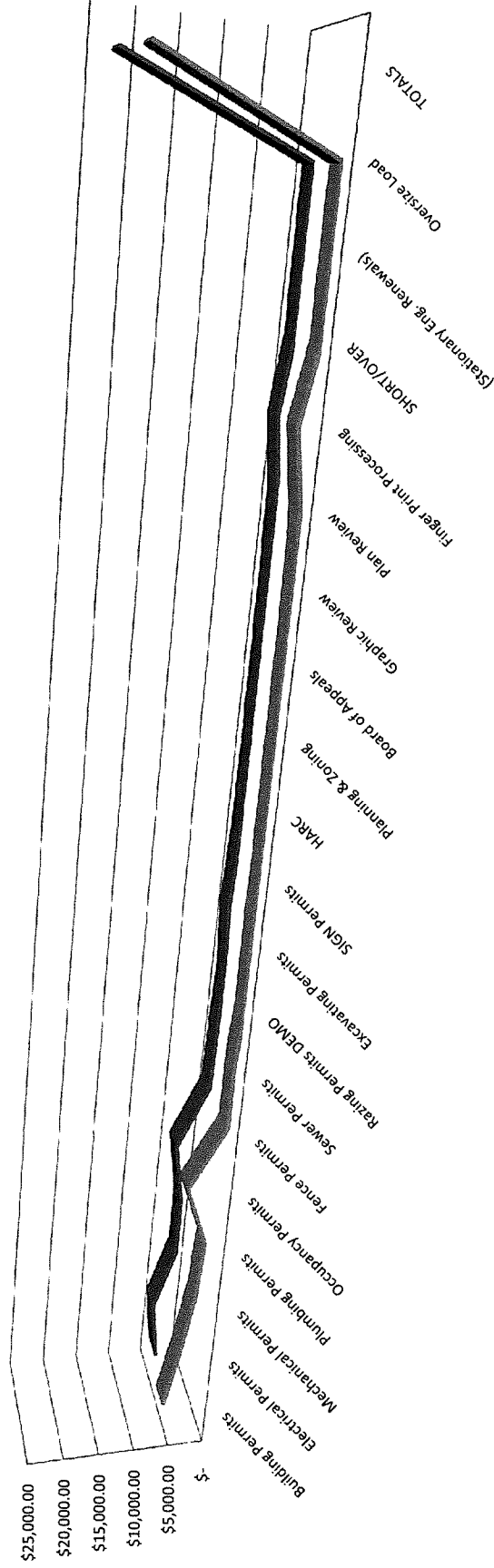
APPROX. CONSTRUCTION VALUE BASED ON

BUILDING PERMITS ISSUED THIS MONTH \$ 429,464.01

We Charge a fee for owner occupied, new home sales and temporary utility permits. The number of permits will not reflect the number of trips needed to ensure compliance.

Submitted - AUGUST 2, 2017
Sheila Nordstrom, Secretary
Building & Zoning Dept.

July 2016 & 2017



	Building Permits	Electrical Permits	Mechanical Permits	Plumbing Permits	Occupancy Permits	Fence Permits	Sewer Permits	Razing Permits DEMO	Excavating Permits	SIGN Permits	HARC	Planning & Zoning	Board of Appeals	Graphic Review	Plan Review	Finger Print Processing	SHORT/OVER	Stationary Eng. Renewals	Oversight Load	TOTALS
2016	\$5,400.00	\$3,720.00	\$2,335.00	\$1,826.00	\$5,075.00	\$440.00	\$525.00	\$-	\$120.00	\$-	\$-	\$-	\$-	\$-	\$250.00	\$1,645.00	\$-	\$210.00	\$-	\$21,356.00
2017	\$4,337.00	\$5,495.00	\$2,885.00	\$2,928.00	\$4,400.00	\$480.00	\$295.00	\$40.00	\$540.00	\$110.00	\$-	\$-	\$-	\$-	\$100.00	\$1,075.00	\$-	\$310.00	\$30.00	\$22,785.00

August 1, 2017
Job No. 999970


✓ 2100 State Street
P.O. Box 1325
Granite City, IL 62040
618-877-1400 • F. 618-452-5541

100 N. Research Dr.
Edwardsville, IL 62025
618-659-0900 • F. 618-659-0941

330 N. Fourth Street, Suite 200
St. Louis, MO 63102
314-241-4444 • F. 314-909-1331

AUG 13 2017

MEMORANDUM
RENEWAL OF ENGINEERING SERVICES AGREEMENT

TO: Mayor and City Council
FROM: Joe Juneau 
RE: Engineering Agreement

1. As requested, we are pleased to submit our agreement to provide Professional Engineering and Land Surveying Services to the City.
2. Our current agreement expires on August 31, 2017.
3. In regard to our Liability Insurance Coverage, enclosed is a copy of our Certificate of Insurance for your review and approval.
4. Attached is our current Schedule of Hourly Rates for the Term of this Agreement.

We appreciate the confidence the City has shown in our firm in the past and look forward to working with the City in the future.

Enclosures

cc: Mr. Scott Oney
Mr. Brian Konzen
Ms. Lynette Kozer

AGREEMENT

This Agreement entered into by and between the City of Granite City, an Illinois Municipal Corporation, hereinafter known as "City", and Juneau Associates, Inc., P.C., an Illinois Professional Corporation, hereinafter known as "Engineer".

1. The City does hereby engage Engineer to perform professional engineering and land surveying services as may be assigned to it from time to time by the Mayor of the City of Granite City, which shall be for the following subjects, which services are to be paid from the general funds of the City of Granite City:

- A. Direct the preparation of infrastructure capital improvements plans
- B. Direct the preparation of an infrastructure budget and master plan.
- C. Direct the preparation and/or interpretation of traffic facilities, building, sewer, street and other public work studies.
- D. Coordinate consultant and contract engineering services relating to public works.
- E. Advise the City Administration on public works matters, contracts, Engineering designs, plans and studies.
- F. Provide the City of Granite City with a copy of all engineering records produced under this Agreement.
- G. Perform such other duties as may be assigned from time to time by the Mayor and City Council of the City of Granite City.

2. Compensation for such professional services to be paid to Juneau Associates, Inc., P.C. shall be according to the schedule, which is attached hereto and made a part hereof as Exhibit A.

3. To the fullest extent permitted by law, the total liability in the aggregate, of Engineer and Engineer's officers, directors, partners, employees, agents and Engineer's Consultants, and any of them, to Owner and anyone claiming by, through or under Owner, for any and all claims, losses, costs or damages whatsoever arising out of, resulting from or in any

way related to the Project or the Agreement from any cause or causes, including but not limited to the negligence, professional errors or omissions, strict liability or breach of contract or warranty express or implied of Engineer or Engineer's officers, directors, partners, employees, agents or Engineer's Consultants or any of them, shall not exceed \$500,000, or the engineer's total fee for services rendered on this project, whichever is greater.

4. This contract shall be in force and effect through August 31, 2018.

5. As this contract provides for professional services, the services to be formed by Engineer shall not be assigned to others, but shall be performed by Engineer unless consent is given to such assignment or subcontracting by the Mayor of the City of Granite City.

In witness hereof the parties hereto have set their hands and seals on this _____ day of August, 2017.

CITY OF GRANITE CITY

BY: _____
MAYOR

ATTEST: _____
CITY CLERK

JUNEAU ASSOCIATES, INC., P.C.

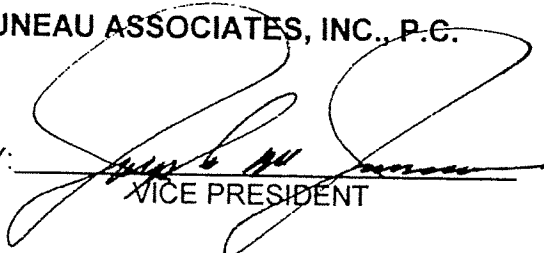
BY:  _____
VICE PRESIDENT

Exhibit A

CURRENT SCHEDULE OF HOURLY RATES

Professional VIII	168.00
Professional VII	155.00
Professional VI	136.00
Professional V	125.00
Professional IV	114.00
Professional III	104.00
Professional II	95.00
Professional I	81.00
Technician V	100.00
Technician IV	80.00
Technician III	70.00
Technician II	60.00
Technician I	50.00
Aide	35.00
Clerical	57.00

* Our most common survey crew consists of one (1) Technician V and one (1) Technician III. The Licensed Professional Surveyor is classified as a Professional VII.

If the assignment requires payment of premium for overtime hours, these rates will be increased by 50% for those overtime hours.

REIMBURSABLE EXPENSES

Beam Breaks	\$ 8.00 each	Paint	\$ 5.00 each
Boat Rental	10.00/hr.	Personal Vehicle-Mileage	0.54/mi.
Computer/CADD	10.00/hr.	Photocopies, black & white	0.15 each
Computer/Word Proc.	5.00/hr.	Photocopies, color, 8 1/2 x 11	0.75 each
Concrete Monuments	17.00 each	Photocopies, color, 8 1/2 x 14	1.00 each
Company Vehicle	10.00/hr.	Photocopies, color, 11 x 17	1.50 each
Fence Posts	7.00 each	Photocopy Prints	0.30/s.f.
Gator	10.00/hr.	Postage	Actual Cost
Misc. Costs & Rental Fees	Actual Cost	Rebar	3.00 each
Mylar	4.00/s.f.	Robotic Total Station	50.00/hr.
Outside Services	Actual + 10%	Surveying Instrument	8.00/hr.
Per Diem (Per day per man)	\$125.00	Wood Stakes	0.75 each

Non-salary costs of authorized travel per diem outside the St. Louis metropolitan area, fees associated with permits, the recording of documents, "express mail" and other direct expenses of items requested by the Client will be billed at cost.

This schedule is subject to reasonable change without prior notice. In any event, this schedule will expire and be superseded by a new schedule annually.

Revised 1/16/17



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/18/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Marsh Sponsored Programs a division of Marsh USA Inc. PO Box 14404 Des Moines IA 50306	CONTACT NAME	
	PHONE (A/C, No, Ext): 800-338-1391 FAX (A/C, No): 888-621-3173 E-MAIL ADDRESS: acecclientrequest@marsh.com	
INSURED Juneau Associates, Inc. P.C. P.O. Box 1325 Granite City, IL 62040	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Hartford Casualty Insurance Company	29424
	INSURER B: Travelers Property Casualty Co	25674
	INSURER C: Hartford Accident and Indemnity Co	22357
	INSURER D: Twin City Fire Insurance Company	29459
	INSURER E:	
INSURER F:		

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY	Y	84SBWVN0881	01/17/2017	01/17/2018	EACH OCCURRENCE \$1,000,000
X	COMMERCIAL GENERAL LIABILITY		Prof. Liab. Excl.			DAMAGE TO RENTED PREMISES (Ea occurrence) \$1,000,000
	CLAIMS-MADE X OCCUR					MED EXP (Any one person) \$10,000
						PERSONAL & ADV INJURY \$1,000,000
						GENERAL AGGREGATE \$2,000,000
						PRODUCTS - COMP/OP AGG \$2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					\$
	POLICY X PRO-JECT LOC					
C	AUTOMOBILE LIABILITY	Y	84UEGKV2203	01/17/2017	01/17/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000
X	ANY AUTO					BODILY INJURY (Per person) \$
	ALL OWNED AUTOS					BODILY INJURY (Per accident) \$
	SCHEDULED AUTOS					PROPERTY DAMAGE (Per accident) \$
	HIRED AUTOS					\$
						\$
A	UMBRELLA LIAB	X	84XHGYH2261	01/17/2017	01/17/2018	EACH OCCURRENCE \$8,000,000
	EXCESS LIAB					AGGREGATE \$8,000,000
	DED X RETENTION \$10,000					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	Y/N	6JUB1E97929317-MO	01/17/2017	01/17/2018	X WC STATU-TORY LIMITS OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N				E.L. EACH ACCIDENT \$1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. DISEASE - EA EMPLOYEE \$1,000,000
						E.L. DISEASE - POLICY LIMIT \$1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

RE: City engineering duties. City of Granite City is included as additional insured for the above coverage's except WC when required by written contract.

CERTIFICATE HOLDER**CANCELLATION**City of Granite City
2000 Edison Avenue
Granite City, IL 62040

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



JUNEASS-01

SCRUZ

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

07/31/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Schatz & Associates, Inc 500 Park Ave, Unit 201 Lake Villa, IL 60046		CONTACT NAME: PHONE (A/C, No, Ext): (847) 356-1520 E-MAIL: info@schatzins.com FAX (A/C, No): (847) 356-5055		
INSURED Juneau Associates Inc 2100 State Street P.O. Box 1325 Granite City, IL 62040		INSURER(S) AFFORDING COVERAGE		NAIC #
		INSURER A: StarNet Insurance Company		
		INSURER B:		
		INSURER C:		
		INSURER D:		
		INSURER E:		
		INSURER F:		

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVR	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	BNUWC0139278	01/17/2017	01/17/2018	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER

CANCELLATION

City of Granite City
2000 Edison Avenue
Granite City, IL 62040

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/26/2017

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Hall & Company 19660 10th Ave NE Poulsbo WA 98370		CONTACT NAME: Jim Ledbetter PHONE (A/C, No, Ext): 360-626-2019 E-MAIL ADDRESS: jledbetter@hallandcompany.com FAX (A/C, No): 360-598-3703	
INSURED JUNEASS-01 JUNEAU ASSOCIATES INC P.C. 2100 State Street PO Box 1325 Granite City IL 62040		INSURER(S) AFFORDING COVERAGE INSURER A: Lexington Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 19437	

COVERAGES

CERTIFICATE NUMBER: 1703133823

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COM/POP AGG \$ \$ \$ \$ \$ \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) \$ \$ \$ \$
	UMBRELLA LIAB EXCESS LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						PER STATUTE OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT \$ \$ \$
A	Professional Liab:Claims Made			035713722	7/28/2017	7/28/2018	\$2,000,000 Per Claim \$2,000,000 Aggregate

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Additional Insured Status is not available on Professional Liability Policy.

CERTIFICATE HOLDER**CANCELLATION**CITY OF GRANITE CITY
2000 EDISON AVENUE
GRANITE CITY IL 62040

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Matthew L. Copus

ORDINANCE NO. _____

AN ORDINANCE TO PLACE A "CHILDREN AT PLAY" SIGN

WHEREAS, the City of Granite City is a home rule unit pursuant to Article VII, Section 5 of the Illinois State Constitution of 1970; and

WHEREAS, the Granite City City Council hereby finds that it will promote the public safety to advise motorists in the vicinity of 4019 Braden Avenue, Granite City, of the presence of children at play in that neighborhood.

NOW, THEREFORE, BE IT HEREBY ORDAINED AND DECREED by the Granite City City Council, in the County of Madison and State of Illinois, that a sign warning motorists of children at play shall be placed at the property commonly known as 4019 Braden Avenue, Granite City, Illinois, so as to warn motorists driving in a southerly direction on Braden Avenue. The office of the Mayor and the Granite City Public Works Department, are hereby directed and authorized to take all reasonable and lawful steps to carry out the intent of this Ordinance, and to place said sign. This Ordinance shall take effect thirty (30) days after passage, and may be published in pamphlet form by the office of the City Clerk.

PASSED this _____ day of August, 2017.

APPROVED: _____
Mayor

ATTEST: _____
City Clerk

ORDINANCE NO. _____
AN ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS
AT 2805 HERBERT STREET, WITHIN THE CITY OF GRANITE CITY, ILLINOIS

WHEREAS Sections 10.34.190 through 10.34.200 of the Granite City Municipal Code provide for the establishment of vehicular parking spaces reserved for the use of physically handicapped persons or disabled veterans; and

WHEREAS it is the recommendation of a Committee of the City Council that certain handicapped spaces be designated by the City Council,

NOW THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY, MADISON COUNTY, ILLINOIS, AS FOLLOWS:

SECTION 1: There is hereby designated one handicapped parking space at 2805 Herbert Street, within the City of Granite City, Illinois, per Granite City Municipal Code Sections 10.34.190 and 10.34.195, as now or as hereafter amended. It is hereby declared unlawful to park any motor vehicle in said handicapped parking space, which is not bearing registration plates or decals issued by a Secretary of State designating the vehicle is operated by or for a handicapped or disabled person.

SECTION 2: The Public Works Department for the City of Granite City shall clearly mark and identify the said handicapped parking space by erecting and maintaining one or more disabled parking signs, in a form approved by the Department of Transportation, at said handicapped parking space designating said parking restriction.

SECTION 3: It shall hereby be illegal for any person, firm, corporation, agent, association, or employee to park any motor vehicle at any time in violation of the reservation and restriction created herein. Any person, firm, corporation, agent, association, or employee who violates any provision of this ordinance shall be subject to a fine as provided by Section 10.34.200 of the Municipal Code, as now or as hereafter amended. A separate offense shall be deemed committed on each day during or on which a violation occurs or continues.

SECTION 4: The terms of any ordinances or provisions thereof in conflict herewith are hereby repealed.

SECTION 5: This Ordinance shall be in full force and effect from and after its passage and approval. This Ordinance shall sunset and expire without further action by the Granite City City Council, and be without force or effect, beginning August 15, 2019. This Ordinance may be published in pamphlet form by the City Clerk.

PASSED by the City Council of the City of Granite City, Illinois, this ____ day of August, 2017.

APPROVED:

Edward Hagnauer, Mayor

ATTEST:

Judy Whitaker, City Clerk

88484.5

ORDINANCE NO. _____
AN ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS
AT 2912 E. 24th STREET, WITHIN THE CITY OF GRANITE CITY, ILLINOIS

WHEREAS Sections 10.34.190 through 10.34.200 of the Granite City Municipal Code provide for the establishment of vehicular parking spaces reserved for the use of physically handicapped persons or disabled veterans; and

WHEREAS it is the recommendation of a Committee of the City Council that certain handicapped spaces be designated by the City Council,

NOW THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY, MADISON COUNTY, ILLINOIS, AS FOLLOWS:

SECTION 1: There is hereby designated one handicapped parking space at 2912 E. 24th Street, within the City of Granite City, Illinois, per Granite City Municipal Code Sections 10.34.190 and 10.34.195, as now or as hereafter amended. It is hereby declared unlawful to park any motor vehicle in said handicapped parking space, which is not bearing registration plates or decals issued by a Secretary of State designating the vehicle is operated by or for a handicapped or disabled person.

SECTION 2: The Public Works Department for the City of Granite City shall clearly mark and identify the said handicapped parking space by erecting and maintaining one or more disabled parking signs, in a form approved by the Department of Transportation, at said handicapped parking space designating said parking restriction.

SECTION 3: It shall hereby be illegal for any person, firm, corporation, agent, association, or employee to park any motor vehicle at any time in violation of the reservation and restriction created herein. Any person, firm, corporation, agent, association, or employee who violates any provision of this ordinance shall be subject to a fine as provided by Section 10.34.200 of the Municipal Code, as now or as hereafter amended. A separate offense shall be deemed committed on each day during or on which a violation occurs or continues.

SECTION 4: The terms of any ordinances or provisions thereof in conflict herewith are hereby repealed.

SECTION 5: This Ordinance shall be in full force and effect from and after its passage and approval. This Ordinance shall sunset and expire without further action by the Granite City City Council, and be without force or effect, beginning August 15, 2019. This Ordinance may be published in pamphlet form by the City Clerk.

PASSED by the City Council of the City of Granite City, Illinois, this ____ day of August, 2017.

APPROVED:

Edward Hagnauer, Mayor

ATTEST:

Judy Whitaker, City Clerk

88484.5

ORDINANCE NO. _____
AN ORDINANCE ESTABLISHING ONE HANDICAPPED PARKING SPACE FOR TWO YEARS
AT 2101 CLEVELAND BOULEVARD, WITHIN THE CITY OF GRANITE CITY, ILLINOIS

WHEREAS Sections 10.34.190 through 10.34.200 of the Granite City Municipal Code provide for the establishment of vehicular parking spaces reserved for the use of physically handicapped persons or disabled veterans; and

WHEREAS it is the recommendation of a Committee of the City Council that certain handicapped spaces be designated by the City Council,

NOW THEREFORE, BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY, MADISON COUNTY, ILLINOIS, AS FOLLOWS:

SECTION 1: There is hereby designated one handicapped parking space at 2101 Cleveland Boulevard, within the City of Granite City, Illinois, per Granite City Municipal Code Sections 10.34.190 and 10.34.195, as now or as hereafter amended. It is hereby declared unlawful to park any motor vehicle in said handicapped parking space, which is not bearing registration plates or decals issued by a Secretary of State designating the vehicle is operated by or for a handicapped or disabled person.

SECTION 2: The Public Works Department for the City of Granite City shall clearly mark and identify the said handicapped parking space by erecting and maintaining one or more disabled parking signs, in a form approved by the Department of Transportation, at said handicapped parking space designating said parking restriction.

SECTION 3: It shall hereby be illegal for any person, firm, corporation, agent, association, or employee to park any motor vehicle at any time in violation of the reservation and restriction created herein. Any person, firm, corporation, agent, association, or employee who violates any provision of this ordinance shall be subject to a fine as provided by Section 10.34.200 of the Municipal Code, as now or as hereafter amended. A separate offense shall be deemed committed

on each day during or on which a violation occurs or continues.

SECTION 4: The terms of any ordinances or provisions thereof in conflict herewith are hereby repealed.

SECTION 5: This Ordinance shall be in full force and effect from and after its passage and approval. This Ordinance shall sunset and expire without further action by the Granite City City Council, and be without force or effect, beginning August 15, 2019. This Ordinance may be published in pamphlet form by the City Clerk.

PASSED by the City Council of the City of Granite City, Illinois, this ____ day of August, 2017.

APPROVED:

Edward Hagnauer, Mayor

ATTEST:

Judy Whitaker, City Clerk

88484.5

Adult Arrest Charge Summary



RECEIVED
JUL 27 2017

AUG 9 2017

Print Date/Time: 08/01/2017 11:49
Login ID: kwojtowicz

From Date: 07/01/2017 00:00
To Date: 07/31/2017 23:59
Officer: All

Granite City Police Department
ORI Number: IL0600700
Ordered By: CrimeCode/Statute

Statute	Crime Code and Description	Counts	# of Arrests using Crime Code
720 ILCS 5.0/12-3.2	0486 Domestic Battery	5	5
720 ILCS 5.0/12-3.2(a)(1)	0486 Domestic Battery 2nd Subsequent Offense	1	1
720 ILCS 5.0/12-3.2-A-1	0486 Domestic Battery - Bodily Harm To Family Member	1	1
720 ILCS 5.0/19-1	0610 Burglary	1	1
720 ILCS 5.0/19-3	0625 Burglary - Residential	1	1
720 ILCS 5.0/16-1(a)(1)	0820 Theft Under \$500.00 (2nd Subsequent)	1	1
720 ILCS 5.0/16-1-A	0820 Theft Under \$500.00	1	1
720 ILCS 5.0/16-25 (a) (1)	0860 Retail Theft Under \$300.00 (Class A)	5	5
720 ILCS 5.0/16-25(a)(1)	0860 Retail Theft Under \$300.00 2nd Subsequent	4	3
625 ILCS 5.0/4-103(a)(1)	0910 Unlawful Possession of Stolen Vehicle or Parts	1	1
720 ILCS 5.0/17-1	1110 Deceptive Practices - over \$150	1	1
720 ILCS 5.0/17-3	1120 Forgery	1	1
720 ILCS 5.0/21-3-A-1	1330 Criminal Trespass to Property - Enters Or Remains	2	2
720 ILCS 5.0/19-4	1365 Criminal Trespass to Residence	1	1
720 ILCS 5.0/21-3-A-2	1365 Criminal Trespass to Property - Enters After Notice	3	3
430 ILCS 65.0/2-A-1	1460 Possess Firearms - No FOID	1	1
720 ILCS 570.0/402(c)	2020 Unlawful Possession of a Controlled Substance <15 grams	2	2
720 ILCS 570.0/404-A-3-C	2030 CONTROLLED SUBSTANCE: Look A Like - Possession	1	1
720 ILCS 635.0/1	2110 Possession of Hypodermic Needle	2	2
720 ILCS 600.0/3.5-A	2170 Possession of Drug Paraphernalia	1	1
625 ILCS 5.0/11-501-A-2	2410 Driving Under the Influence - Alcohol	2	2
625 ILCS 5.0/3-413-F	2455 Operate A Vehicle With Expired Registration 1st and 2nd Offense	1	1
625 ILCS 5.0/3-707	2461 Operating Uninsured Motor Vehicle	1	1
625 ILCS 5.0/6-101*	2470 No Valid Drivers License - More than 6 Mo's and All Other Cases - Misdemeanor	1	1
625 ILCS 5.0/6-303-D	2480 Driving With Suspended/Revoked Drivers License (Felony)	2	2
720 ILCS 5.0/26-1-A-1	2890 Disorderly Conduct - All Others	1	1
720 ILCS 5.0/31-1	3710 Resisting/Obstructing a Peace Officer	3	3
720 ILCS 5.0/31-1(a)(7)	3710 Resisting a Peace Officer	1	1
720 ILCS 5.0/31-4.5	3710 Obstructing Identification	2	2
725 ILCS 225.0/2	3740 Fugitive from Justice	1	1
720 ILCS 5.0/10-5.5	4255 Unlawful Visitation Interference	1	1
XXX 720 ILCS 5.0/12-30	4387 Violation of Order of Protection	1	1
415 ILCS 105/4	5000 Violation of the Illinois Litter Control Act	2	2
Warrant In-State	5081 Warrant In-State	92	71
625 ILCS 5.0/11-601-A	6610 Fail to Reduce Speed/Accident to Avoid Accident	1	1
625 ILCS 5/4-105(a)(1)	8002 Offenses Relating to Dispositions of Titles and Registration	1	1
625 ILCS 5.0/11-402-A	8222 Leaving the Scene of an Accident -Vehicle Damage	1	1
5.02.020	9990 No Business License	2	2
9.06.010	G021 Unlawful resisting or obstructing police	1	1
9.33.020	G025 Public consumption alcohol	2	2
9.48.020	G027 Disorderly conduct	2	2
9.63.010	G029 Criminal Trespass	2	2
9.66.020	G030 Criminal damage to property	1	1
Totals:		160	138

Adult Arrest Charge Summary



Print Date/Time: 08/01/2017 13:08
Login ID: krwojtowicz

From Date: 07/17/2017 00:00
To Date: 07/31/2017 23:59
Officer: All

Granite City PD
ORI Number: IL0600700
Ordered By: CrimeCode/Statute

Statute	Crime Code and Description	Counts	# of Arrests using Crime Code
720 ILCS 5/12-3.05(a)(1)	0410 Aggravated Battery-Great Bodily Harm	1	1
720 ILCS 5.0/12-3-A-1	0460 Battery: Simple	1	1
720 ILCS 5.0/19-3	0625 Burglary - Residential	1	1
720 ILCS 5.0/16-1-B-4	0810 Theft - Over	1	1
720 ILCS 5.0/16A-3-H	0860 Retail Theft - Failure To Fulfill Lease	1	1
720 ILCS 5/16-25(a)(1)	0860 Retail Theft Under \$300	4	4
720 ILCS 5/16-25(a)(1)*	0860 Retail Theft Under \$300-2nd Subsequent Offense	1	1
R-720 ILCS 5.0/16A-3-A	0860 Retail Theft: Takes Possession Of Property	1	1
720 ILCS 5.0/16-1-A	0890 Theft from Building	1	1
720 ILCS 5.0/17-3	1120 Forgery	2	2
625 ILCS 5.0/4-102-A-1	1310 Criminal Damage to Vehicle	1	1
720 ILCS 5.0/21-1-1-A	1310 Criminal Damage to Property Under \$300	1	1
720 ILCS 5.0/21-3-A-1	1330 Criminal Trespass to Property - Enters Or Remains	1	1
720 ILCS 5.0/21-3-A-3	1330 Criminal Trespass to Property - Remains After Notice	1	1
720 ILCS 5.0/21-5-A	1350 Criminal Trespass to State Land - Enters/Remains After Notice	1	1
720 ILCS 570.0/402	2020 Possession of Controlled Substance	1	1
720 ILCS 570.0/402(c)	2020 Possession of <15 grams Heroin	1	1
720 ILCS 635.0/1	2110 Possession of Hypodermic Needle	1	1
625 ILCS 5.0/6-303-A	2480 Driving With Suspended/Revoked Drivers License (Misdemeanor)	1	1
725 ILCS 225.0/13	5000 Fugitive from Justice	1	1
Warrant In-State	5081 Warrant In-State	51	44
Pending Investigation	9999 Pending Investigation	2	2
9.08.030	COLL1 BATTERY	1	1
9.06.010	GRC1 Resisting / Obstructing a Police Officer	4	3
9.48.020	GRC1 Disorderly Conduct	7	7
Totals:		89	81

Case Offense Crime Code Summary



Print Date/Time: 08/01/2017 11:50
Login ID: kwojtowicz
Badge Number: All

From Date: 07/01/2017
To Date: 07/31/2017

Granite City Police Department
ORI Number: IL0600700
Assignment Type: All

Crime Code and Description	Counts	# of Cases Using Crime Code
0260 SEXUAL ASSAULT: Criminal	3	3
0320 ROBBERY	1	1
0410 BATTERY: Aggravated	1	1
0460 BATTERY: Simple	1	1
0486 BATTERY: Domestic	15	14
0510 ASSAULT: Aggravated	1	1
0610 BURGLARY: Business	22	22
0625 BURGLARY: Residential	6	6
0760 THEFT: Burglary From Motor Vehicle	4	4
0810 THEFT: Over \$500.00	6	6
0820 THEFT: Under \$500.00	6	6
0860 THEFT: Retail	6	6
0890 THEFT: From Building	2	2
0910 THEFT: Motor Vehicle	2	2
1010 ARSON	3	3
1025 ARSON: Aggravated	2	2
1120 DECEPTION: Forgery	7	7
1130 DECEPTION: Fraud	5	5
1137 Identity Theft	3	3
1150 DECEPTION: Credit Card Fraud	2	2
1220 DECEPTION: Theft Of Lost Property	2	2
1310 CRIMINAL DAMAGE: To Property	6	6
1410 DEADLY WEAPONS: Unlawful Use	1	1
1563 SEX OFFENSES: Criminal Sexual Abuse	1	1
2020 CONTROLLED SUBSTANCE: Possession Of	6	6
2420 TRAFFIC: DUI - Drugs	1	1
2430 TRAFFIC: Illegal Transportation Of Liquor	1	1
2455 TRAFFIC: No Registration	1	1
2461 TRAFFIC: Operating Uninsured Motor Vehicle	1	1
2475 TRAFFIC: Motor Vehicle Anti-Theft Laws	2	2
2480 TRAFFIC: Suspended/Revoked Drivers License	2	2
2890 DISORDERLY CONDUCT: All Others	2	2
3710 PEACE OFFICER: Resist/Obstruct/Disarm	1	1
4250 KIDNAPPING: Child Abduction	1	1
4387 ORDER OF PROTECTION: Violation Of	2	2
5000 CRIMINAL OFFENSES: All Other	2	2
5060 TRAFFIC: Illinois Vehicle Code	1	1
5081 WARRANT: In State	2	2
5082 WARRANT: Out Of State	1	1

Case Offense Crime Code Summary



Print Date/Time: 08/01/2017 11:50
Login ID: kwojtowicz
Badge Number: All

From Date: 07/01/2017
To Date: 07/31/2017

Granite City Police Department
ORI Number: IL0600700
Assignment Type: All

Crime Code and Description	Counts	# of Cases Using Crime Code
5083 Recovered Property	5	5
6431 Death	7	7
8201 AGGRAVATED FLEEING/ELUDING POLICE	1	1
8401 DEFECTIVE WINDSHIELD	1	1
G012 Inoperable vehicle	4	4
Count Total:	152	Case Total: 151

Case Offense Crime Code Summary



Print Date/Time: 08/01/2017 13:11
Login ID: krwojtowicz
Badge Number: All

From Date: 07/17/2017
To Date: 07/31/2017

Granite City PD
ORI Number: IL0600700
Assignment Type: All

Crime Code and Description	Counts	# of Cases Using Crime Code
0260 SEXUAL ASSAULT: Criminal	1	1
0410 BATTERY: Aggravated	5	5
0460 BATTERY: Simple	1	1
0486 BATTERY: Domestic	1	1
0510 ASSAULT: Aggravated	1	1
0610 BURGLARY: Business	4	4
0625 BURGLARY: Residential	8	8
0720 THEFT: Theft of Motor Vehicle Parts	1	1
0760 THEFT: Burglary From Motor Vehicle	7	7
0810 THEFT: Over	5	5
0820 THEFT: Under	9	9
0860 THEFT: Retail	5	4
0910 THEFT: Motor Vehicle	3	3
1120 DECEPTION: Forgery	3	3
1137 Identity Theft	2	2
1150 DECEPTION: Credit Card Fraud	1	1
1310 CRIMINAL DAMAGE: To Property	6	6
1330 CRIMINAL TRESPASS: To Land	1	1
1410 DEADLY WEAPONS: Unlawful Use	1	1
1562 SEX OFFENSES: Aggravated Criminal Sexual Abuse	1	1
1710 CHILD: Endangering Life/Health Of	1	1
1925 Poss. or Del. of Material W/intent to Man. Meth	1	1
2020 CONTROLLED SUBSTANCE: Possession Of	2	2
2410 TRAFFIC: DUI - Alcohol	1	1
2890 DISORDERLY CONDUCT: All Others	2	2
3100 DISORDERLY CONDUCT: Mob Action	1	1
4387 ORDER OF PROTECTION: Violation Of	1	1
4530 Sex Offender- Other Violation	1	1
5000 CRIMINAL OFFENSES: All Other	2	2
5081 WARRANT: In State	2	2
8201 AGGRAVATED FLEEING/ELUDING POLICE	1	1
9999 Non-Criminal Offense	8	8
GRC1 Granite City Ordinance	3	3
Count Total:	92	Case Total: 91

Ticket Statistics



Print Date/Time: 08/01/2017 11:46
 Login ID: kwojtowicz
 Statute: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Ticket Type: All

Granite City Police Department
 ORI Number: IL0600700

Admin Citations	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
5.02.020 No Business License	2	0	0	0	0	0	0	0	0	0	0	0	2
10.34.020a No Parking sidewalk	0	0	0	0	1	0	0	0	0	0	0	0	1
15.34.100 (b) Occupancy Code Violation	0	1	0	0	0	0	0	0	0	0	0	0	1
10.34.060 Limited Parking Areas, Exceeding Posted Time	0	0	2	0	0	0	0	0	0	0	0	0	2
10.34.050 Parking wrong side of street	1	1	0	0	0	1	0	0	0	0	0	0	3
15.08.830 Property Maintenance Code Dwelling Units Sanitary Conditions	0	0	1	0	0	0	0	0	0	0	0	0	1
6.04.010 Animals - public nuisance	0	0	0	1	0	0	0	0	0	0	0	0	1
5.142.030 Failure to Attend Crime Free Multi-Housing Training	3	2	0	0	0	0	0	0	0	0	0	0	5
10.22.040 Crossing at Other than Crosswalks	5	2	1	2	3	7	1	0	0	0	0	0	21
8.39.040 Limbs/Brush on Property public ROW	0	0	0	0	0	2	0	0	0	0	0	0	2
5.02.030 No Landlord Business License	0	2	0	0	0	0	0	0	0	0	0	0	2
6.16.040 Animal Impoundment - Notice of Ordinance Violation	0	0	0	0	3	0	0	0	0	0	0	0	3
15.08.010 Property Maintenance Code	0	0	0	0	2	0	0	0	0	0	0	0	2
4987 Parking on Non-Permanently Paved Surfaces	0	4	0	0	0	0	0	0	0	0	0	0	4
9.79.040 Possession of tobacco and smoking paraphernalia--Prohibited	1	0	0	0	0	0	0	0	0	0	0	0	1
9.28.010 Aggressive Begging	0	0	0	1	0	0	0	0	0	0	0	0	1
15.08.100 Occupancy Permit Required	18	7	11	9	5	7	4	0	0	0	0	0	61
9.35.020 Possession Drug Paraphernalia	0	1	0	0	0	0	0	0	0	0	0	0	1
9.57.010 Theft	1	0	0	0	0	0	0	0	0	0	0	0	1
10.34.055 Parking in areas between sidewalks and streets	2	0	0	0	0	0	0	0	0	0	0	0	2
10.34.195 Unauthorized use of parking spaces reserved for handicapped persons	0	0	1	0	0	0	0	0	0	0	0	0	1
10.34.020 Illegal parking	8	0	1	2	0	0	0	0	0	0	0	0	11
9.48.020 Disorderly conduct	7	1	0	0	0	0	0	0	0	0	0	0	8
9.34.020 Unlawful possession cannabis	1	0	1	1	0	0	0	0	0	0	0	0	3
9.33.020 Public consumption alcohol	0	0	0	0	0	0	1	0	0	0	0	0	1
8.64.020 Littering on public ROW	0	0	0	0	0	1	0	0	0	0	0	0	1

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	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
8.42.030 Inoperable vehicle	0	2	0	0	10	2	1	0	0	0	0	0	15
8.34.020 Trash on property	0	1	0	1	3	1	0	0	0	0	0	0	6
8.28.010 Grass/Weeds>8 inches high	0	0	0	0	3	0	0	0	0	0	0	0	3
6.16.010 Dogs restraint required	2	1	1	2	1	0	0	0	0	0	0	0	7
Admin Citations Totals	51	25	19	19	31	21	7	0	0	0	0	0	173
Written Warning													
625 ILCS 5.0/11-1513 Illegal Parking of Bicycle	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-805 Improper Stop or Turn Signal	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-1304 Illegal Parking on Roadway	0	1	0	0	0	0	0	0	0	0	0	0	1
605 ILCS 10.0/27.2-A Obstructing Registration on Tollway	1	1	0	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/3-401-D-2 Expired Registration 2nd Division Vehicle	1	1	0	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/12-201(b) operate wipers w/o headlights	1	1	0	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/6-303(A) Driving With Suspended Drivers License (Misdemeanor)	1	0	1	0	0	1	0	0	0	0	0	0	3
625 ILCS 5.0/3-413(F) Registration Expiration 2nd	13	22	19	9	5	5	11	0	0	0	0	0	84
10.34.020g No Parking POSted No Parking	0	0	1	0	0	0	0	0	0	0	0	0	1
10.34.020b No Parking Driveway	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-601-B-1 Speeding 1-10 Above limit	4	2	4	0	0	2	0	0	0	0	0	0	12
625 ILCS 5.0/11-601-B-4 Speeding 21-25 MPH Above the Speed Limit	0	3	0	1	0	0	0	0	0	0	0	0	4
625 ILCS 5.0/11-601-B-2 Speeding 11-14 MPH Above Limit	3	6	6	1	3	1	1	0	0	0	0	0	21
625 ILCS 5/11-1511 Failure to Signal Turn	0	1	0	0	0	0	0	0	0	0	0	0	1
10.22.040 Crossing at Other than Crosswalks	0	1	0	0	0	1	0	0	0	0	0	0	2
625 ILCS 5.0/12-610.2 Operating a motor vehicle while using an electronic communication device such as cell phone	1	1	1	1	1	3	1	0	0	0	0	0	9
625 ILCS 5.0/12-610.1 No Cell Phone In School /Work Zone	0	0	1	0	0	0	0	0	0	0	0	0	1
10.48.050 Truck route violation	1	0	1	0	1	2	1	0	0	0	0	0	6
10.26.020 Headlamps required	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-907-C Failed To Yield or Slow-Upn Approaching Emergency Vehicle	0	0	0	0	1	0	0	0	0	0	0	0	1

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625 ILCS 5.0/11-306 Disregard Traffic Control Device	1	1	1	0	3	3	2	0	0	0	0	0	11
625 ILCS 5.0/11-801 IMPROPER TURN	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-1204(b) Disobeyed Stop Sign	19	33	21	19	12	9	4	0	0	0	0	0	117
625 ILCS 5.0/12-611 Illegal Operation of Sound Amplification System, Audible at 75 Feet +	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-1301.3 Unauthorized Use of Handicapped Parking	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 25.0/4-a Failure to Properly Secure Child Age 8<16 in Appropriate Restraint	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/3-416 Failure To Notify Secretary Of State of Address/Name Change	1	3	4	0	0	0	0	0	0	0	0	0	8
625 ILCS 5.0/3-413-F* Operate A Vehicle With Expired Registration 3rd and Subq Offense Within 1 Year	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-413-A No Front/Rear Plate 1st and 2nd Offense	2	0	2	1	0	0	1	0	0	0	0	0	6
625 ILCS 5.0/11-804 Failure to Signal When Required	1	4	1	1	0	1	2	0	0	0	0	0	10
625 ILCS 5.0/12-602 Muffler-Loud, Excessive Noise, No Muffler	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-401-A No Valid Registration 1st and 2nd Offense	0	2	2	1	1	0	1	0	0	0	0	0	7
625 ILCS 5.0/11-1008 Failure to Yield to Pedestrian	0	0	0	0	1	0	0	0	0	0	0	0	1
625 ILCS 25.0/4 Failure to Properly Secure Child Under Age of 8 in Appropriate Child Restraint System	0	0	1	1	0	1	0	0	0	0	0	0	3
625 ILCS 5.0/12-502 No Mirror on Vehicle	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-211 Improper Lighting - One Headlamp	5	1	8	4	2	0	2	0	0	0	0	0	22
625 ILCS 5.0/11-708 Improper Lane Usage	1	1	0	0	1	1	1	0	0	0	0	0	5
625 ILCS 5.0/6-101 No Valid Drivers License- Expired 6 Mo's or Less - Petty Offense	1	3	4	2	1	0	0	0	0	0	0	0	11
625 ILCS 5.0/11-601-A Fail to Reduce Speed/Accident to Avoid Accident	0	3	0	1	1	0	0	0	0	0	0	0	5
625 ILCS 5.0/3-707 Operating Uninsured Motor Vehicle	0	8	14	6	2	3	2	0	0	0	0	0	35
625 ILCS 5.0/11-305 Disobeyed Traffic Signal/Sign	1	1	1	0	0	0	0	0	0	0	0	0	3
625 ILCS 5.0/12-201-B* No Red Taillights	4	0	4	3	2	1	2	0	0	0	0	0	16
625 ILCS 5.0/12-201-B* Only One Red Taillight	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-201-B* No Taillights	0	1	0	0	0	1	0	0	0	0	0	0	2
625 ILCS 5.0/12-503-A Obstructed Windshield or Front Side Window	0	1	0	0	0	0	0	0	0	0	0	0	1

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625 ILCS 5.0/12-503-E Defective Windshield, Side and/or Rear Window	1	3	1	0	1	0	1	0	0	0	0	0	7
625 ILCS 5.0/12-201-C No Rear Registration Plate Light	5	8	5	3	0	0	0	0	0	0	0	0	21
625 ILCS 5.0/11-710-A Following too Closely - (reasonable and prudent)	0	2	0	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-305-E Improper Stop/Yield When Traffic Signal Not Illuminated	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-902 Failed to Yield - Turning Left	0	1	0	1	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-904-B Improper Stop At Stop Intersection	1	3	0	0	1	0	0	0	0	0	0	0	5
625 ILCS 5.0/11-906 Failed to Yield-Private Road or Drive	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-309-2 Failure To Stop/Yield At Flashing Red Signal	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-305-A Disobeyed Traffic Control Device	1	4	1	1	0	1	2	0	0	0	0	0	10
625 ILCS 5.0/11-708-B Improper Lane Usage -One Way Street Street, Wrong Side, Violated Median	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-601-B-3 Speeding 15-20 MPH Above Limit	1	7	3	1	0	2	0	0	0	0	0	0	14
625 ILCS 5.0/11-601.5 Speeding 26-34 MPH above limit	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-208-B No Signal Lamp or Signal Device - No Stop Light	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-1201-B Disobeyed Crossing Gate/Barrier	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-707-B Improper Passing - Crossing Line - No Passing Zone	0	0	0	0	0	1	1	0	0	0	0	0	2
625 ILCS 5.0/12-201-A Driving Without Lighted Lamp (Motorcycle)	0	1	1	1	0	1	0	0	0	0	0	0	4
625 ILCS 5.0/12-202 Driving Without Lights When Required	1	1	1	0	0	0	0	0	0	0	0	0	3
625 ILCS 5.0/11-709-A Improper Lane Usage - Laned Roads	3	4	3	1	1	4	0	0	0	0	0	0	16
625 ILCS 5.0/11-901 Failed to Yield at Intersection	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-210-A Failure To Dim Headlights- Approaching Vehicle 500'	0	2	1	0	0	1	0	0	0	0	0	0	4
625 ILCS 5.0/12-603.1* Failure to Wear a Properly Adjusted and Fastened Seat Safety Belt - Passenger	1	1	1	0	1	0	0	0	0	0	0	0	4
625 ILCS 5.0/12-603.1 Failure to Wear Properly Adjusted and Fastened Seat Safety Belt	2	2	3	1	2	6	3	0	0	0	0	0	19
625 ILCS 5.0/6-112 Driver License Not On Person - Failure to Display	0	0	1	0	0	0	1	0	0	0	0	0	2
625 ILCS 5.0/3-413-B Improper Display/Attachment of License Plates/Sticker	0	1	1	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/3-413 Failure To Display Registration Plates/Decal 1st and 2nd Offense	0	3	4	1	0	0	1	0	0	0	0	0	9



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625 ILCS 5.0/3-703 Improper Use of Registration	3	0	0	0	0	0	1	0	0	0	0	0	4
625 ILCS 5.0/3-413-F Operate A Vehicle With Expired Registration 1st and 2nd Offense	7	9	1	3	1	2	0	0	0	0	0	0	23
625 ILCS 5.0/3-701-1 No Valid Registration - Vehicle Operator	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-701-2 No Valid Registration - Reciprocal State	0	1	0	0	0	0	0	0	0	0	0	0	1
Written Warning Totals	90	161	129	70	44	55	41	0	0	0	0	0	590
Traffic													
625 ILCS 5.0/11-506 Street Racing	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/11-503-A-1 Reckless Driving	0	1	1	0	0	1	4	0	0	0	0	0	7
625 ILCS 5.0/11-805 Improper Stop or Turn Signal	0	1	0	0	0	1	0	0	0	0	0	0	2
625 ILCS 5.0/11-1304 Illegal Parking on Roadway	0	1	1	0	1	0	0	0	0	0	0	0	3
625 ILCS 5.0/3-401-D-2 Expired Registration 2nd Division Vehicle	0	1	1	2	0	0	0	0	0	0	0	0	4
720 ILCS 600.0/3.5 (c) Possession of Cannabis Paraphernalia	4	1	3	1	0	0	0	0	0	0	0	0	9
720 ILCS 550.0/4 (A) Possession of Cannabis < 10 grams (civil)	4	2	5	1	1	0	0	0	0	0	0	0	13
625 ILCS 5.0/6-101# Invalid Temporary License	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-201(b) operate wipers w/o headlights	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-804(c) Improper Stop without signal	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/6-303(A) Driving With Suspended Drivers License (Misdemeanor)	18	18	25	14	16	14	8	0	0	0	0	0	113
625 ILCS 5.0/3-413(F) Registration Expiration 2nd	15	12	15	12	6	6	14	0	0	0	0	0	80
10.34.020g No Parking Posted No Parking	1	0	1	0	0	0	0	0	0	0	0	0	2
10.34.020b No Parking Driveway	0	0	0	0	1	0	0	0	0	0	0	0	1
10.34.020a No Parking sidewalk	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-601.5-B Speeding 35+ MPH Over Limit	1	3	0	0	0	1	3	0	0	0	0	0	8
625 ILCS 5.0/11-601-B-1 Speeding 1-10 Above limit	1	0	0	2	0	2	0	0	0	0	0	0	5
625 ILCS 5.0/11-601-B-4 Speeding 21-25 MPH Above the Speed Limit	1	1	4	1	1	0	2	0	0	0	0	0	10
625 ILCS 5.0/11-601-B-2 Speeding 11-14 MPH Above Limit	3	2	5	0	1	0	1	0	0	0	0	0	12
625 ILCS 5.0/3-701-(A)(1) No Evidence of Registration	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-208 No Brake Lights	0	0	0	0	0	0	1	0	0	0	0	0	1

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625 ILCS 5.0/11-1511 Failure to Signal Turn	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-704(a) Improper Overtaking on Right	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/12-610.2 Operating a motor vehicle while using an electronic communication device such as cell phone	4	7	1	2	1	1	2	0	0	0	0	0	18
625 ILCS 5.0/11-1303 Parking Where Prohibited	0	0	1	1	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/12-101 Unsafe Equipment 1st	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-1304.5 Parking Vehicle with Expired Registration	11	11	13	1	1	3	7	0	0	0	0	0	47
10.48.050 Truck route violation	2	3	1	0	1	8	4	0	0	0	0	0	19
10.34.020 Illegal parking	0	0	10	0	0	2	0	0	0	0	0	0	12
625 ILCS 5.0/11-907-C Failed To Yield or Slow-Upon Approaching Emergency Vehicle	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/6-210-2 Driving w/susp lic	2	0	0	0	0	1	0	0	0	0	0	0	3
625 ILCS 5.0/11-306 Disregard Traffic Control Device	1	2	1	1	0	5	1	0	0	0	0	0	11
625 ILCS 5.0/12-301 DEFECTIVE BRAKES	0	0	1	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-505 SQUEALING TIRES	0	2	1	1	0	0	2	0	0	0	0	0	6
625 ILCS 5.0/11-802 IMPROPER U TURN	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-801 IMPROPER TURN	0	0	2	1	0	0	0	0	0	0	0	0	3
625 ILCS 5.0/11-1404-A Operating Motorcycle Without Glass/Goggles/Shield	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/4-201(b) The Abandonment of a Vehicle or any Part Thereof on Private or Public Property, other than a Highway	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-1204(b) Disobeyed Stop Sign	13	17	16	7	19	10	13	0	0	0	0	0	95
625 ILCS 5.0/11-705 Improper Overtaking -on Left	0	1	0	2	0	0	0	0	0	0	0	0	3
625 ILCS 25.0/4* Failure to Properly Secure Child Under Age 8 in Appropriate Child Restraint System 2nd+ Offense	2	0	0	0	2	0	0	0	0	0	0	0	4
625 ILCS 5.0/3-708* Registration Suspended For No Insurance 2nd Offense	0	0	0	2	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/3-413-F* Operate A Vehicle With Expired Registration 3rd and Subq Offense Within 1 Year	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-413-A No Front/Rear Plate 1st and 2nd Offense	2	0	0	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-804 Failure to Signal When Required	2	0	0	0	4	5	3	0	0	0	0	0	14

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625 ILCS 5.0/6-304 Permitting Unauthorized Person to Drive	0	0	0	0	0	0	3	0	0	0	0	0	3
625 ILCS 5.0/12-602 Muffler-Loud, Excessive Noise, No Muffler	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-401-A No Valid Registration 1st and 2nd Offense	5	5	6	3	6	2	3	0	0	0	0	0	30
625 ILCS 5.0/11-1008 Failure to Yield to Pedestrian	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-1402 Improper Backing	1	2	2	5	4	1	0	0	0	0	0	0	15
625 ILCS 25.0/4 Failure to Properly Secure Child Under Age of 8 in Appropriate Child Restraint System	1	1	1	1	2	0	1	0	0	0	0	0	7
625 ILCS 5.0/11-1301 Improper Parking on Roadway	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-502 No Mirror on Vehicle	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/4-104-A-4 Offenses Relating to Possession of Titles and Registration	0	0	0	1	0	0	1	0	0	0	0	0	2
625 ILCS 5.0/6-113 Operation in Violation of Restriction or Restricted Driving Permit	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-211 Improper Lighting - One Headlamp	0	1	3	1	0	0	0	0	0	0	0	0	5
625 ILCS 5.0/4-104-A-4 Unlawful Display of a Fictitious Temporary Regs Plate	0	0	0	1	1	1	0	0	0	0	0	0	3
625 ILCS 5.0/11-501-A-2* Driving Under the Influence - Felony	3	0	0	4	2	0	2	0	0	0	0	0	11
625 ILCS 5.0/11-708 Improper Lane Usage	0	0	0	1	1	0	0	0	0	0	0	0	2
625 ILCS 5.0/6-101 No Valid DL Expired more than 6 months	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/6-101 No Valid Drivers License- Expired 6 Mo's or Less - Petty Offense	3	10	10	12	8	4	5	0	0	0	0	0	52
625 ILCS 5.0/11-601-A Fail to Reduce Speed/Accident to Avoid Accident	19	19	18	17	16	16	12	0	0	0	0	0	117
625 ILCS 5.0/3-707 Operating Uninsured Motor Vehicle	57	69	59	56	42	33	32	0	0	0	0	0	348
625 ILCS 5.0/11-305 Disobeyed Traffic Signal/Sign	10	5	1	2	1	0	0	0	0	0	0	0	19
625 ILCS 5.0/12-201-B* Only One Red Taillight	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-503-E Defective Windshield, Side and/or Rear Window	1	2	3	3	1	1	2	0	0	0	0	0	13
625 ILCS 5.0/12-201-C No Rear Registration Plate Light	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-708-D Improper Lane Usage - Crossing Dividing Space	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-305-B Avoided Traffic Control Device	1	1	1	0	0	1	1	0	0	0	0	0	5
625 ILCS 5.0/11-1426.1 Improper Operation of ATV or Off-Highway Motor-Cycle	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-710-A Following too Closely - (reasonable and prudent)	0	2	1	0	1	1	0	0	0	0	0	0	5

Ticket Statistics



Print Date/Time: 08/01/2017 11:46
 Login ID: kwojowicz
 Statute: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Ticket Type: All

Granite City Police Department
 ORI Number: IL0600700

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
625 ILCS 5.0/11-907-A-1 Failed To Yield - Authorized Emergency Vehicle	0	0	0	0	1	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-305-E Improper Stop/Yield When Traffic Signal Not Illuminated	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-902 Failed to Yield - Turning Left	2	4	3	2	2	4	2	0	0	0	0	0	19
625 ILCS 5.0/11-1205 Failed to Stop at Sidewalk or Emerging from Alley or Diveway	1	0	3	0	4	2	0	0	0	0	0	0	10
625 ILCS 5.0/11-904-B Improper Stop At Stop Intersection	0	4	0	1	0	2	0	0	0	0	0	0	7
625 ILCS 5.0/11-906 Failed to Yield-Private Road or Drive	1	0	1	0	0	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-601-A Driving Too Fast For Conditions	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/15-109-B Failure To Secure Load Before Operating	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-305-A Disobeyed Traffic Control Device	1	2	2	1	1	0	0	0	0	0	0	0	7
625 ILCS 5.0/11-708-B Improper Lane Usage -One Way Street Street, Wrong Side, Violated Median	0	0	0	1	0	0	2	0	0	0	0	0	3
625 ILCS 5.0/12-405-C Use Of Unsafe Tires	0	1	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/11-601-B-3 Speeding 15-20 MPH Above Limit	5	3	8	1	5	1	1	0	0	0	0	0	24
625 ILCS 5.0/11-601.5 Speeding 26-34 MPH above limit	2	2	1	1	1	0	0	0	0	0	0	0	7
625 ILCS 5.0/12-208-B No Signal Lamp or Signal Device - No Stop Light	1	0	0	0	1	0	2	0	0	0	0	0	4
625 ILCS 5.0/11-1201-B Disobeyed Crossing Gate/Barrier	1	0	0	0	0	0	1	0	0	0	0	0	2
625 ILCS 5.0/11-1010 Pedestrians Under the Influence or Alcohol or Drugs	0	2	1	0	0	0	0	0	0	0	0	0	3
625 ILCS 5.0/11-704-C Improper Passing of a Vehicle Not To Leave Roadway	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-707-B Improper Passing - Crossing Line - No Passing Zone	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-702 Improper Passing Of Vehicle In Opposite Direction	0	0	0	1	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/12-201-A Driving Without Lighted Lamp (Motorcycle)	0	0	0	0	0	1	1	0	0	0	0	0	2
625 ILCS 5.0/11-1403 Improper Operation Of Motorcycle	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-709-A Improper Lane Usage - Laned Roads	2	9	2	4	6	4	3	0	0	0	0	0	30
625 ILCS 5.0/11-901 Failed to Yield at Intersection	2	3	0	3	2	1	0	0	0	0	0	0	11
625 ILCS 5.0/11-801-A Improper Turn	0	0	0	1	1	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-901.01 Failure To Yield/Stop At T Intersection	0	0	0	0	1	1	1	0	0	0	0	0	3
625 ILCS 5.0/11-407-A Failure to Report Accident to Police Authority	0	0	0	0	2	3	1	0	0	0	0	0	6

Ticket Statistics



Print Date/Time: 08/01/2017 11:46
Login ID: kwojowicz
Statute: All
From Date: 01/01/2017
To Date: 07/31/2017
Ticket Type: All

Granite City Police Department
ORI Number: IL0600700

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
625 ILCS 5.0/11-204 Fleeing/Attempt to Elude Police	0	1	0	2	2	1	1	0	0	0	0	0	7
625 ILCS 5.0/6-104-A Violation of License Classification - Second Division Vehicle, Motorcycle or Motor Drivin Cycle	0	0	0	0	0	2	0	0	0	0	0	0	2
625 ILCS 5.0/12-603.1* Failure to Wear a Properly Adjusted and Fastened Seat Safety Belt - Passenger	3	1	3	2	5	2	0	0	0	0	0	0	16
625 ILCS 5.0/12-603.1 Failure to Wear Properly Adjusted and Fastened Seat Safety Belt	5	9	3	8	7	7	5	0	0	0	0	0	44
625 ILCS 5.0/6-303-A Driving With Suspended/Revoked Drivers License (Misdemeanor)	14	8	7	5	5	4	2	0	0	0	0	0	45
625 ILCS 5.0/6-101-A No Valid DL	4	3	1	0	2	0	0	0	0	0	0	0	10
625 ILCS 5.0/3-413-B Improper Display/Attachment of License Plates/Sticker	1	0	0	0	0	0	0	0	0	0	0	0	1
625 ILCS 5.0/3-413 Failure To Display Registration Plates/Decal 1st and 2nd Offense	0	1	0	0	1	2	0	0	0	0	0	0	4
625 ILCS 5.0/3-703 Improper Use of Registration	3	3	4	2	0	1	3	0	0	0	0	0	16
625 ILCS 5.0/3-710 Display of False Insurance Card	0	0	0	0	1	0	1	0	0	0	0	0	2
625 ILCS 5.0/3-708 Registration Suspended For No Insurance	1	1	1	1	3	0	0	0	0	0	0	0	7
625 ILCS 5.0/3-413-F Operate A Vehicle With Expired Registration 1st and 2nd Offense	10	9	2	2	4	3	4	0	0	0	0	0	34
625 ILCS 5.0/3-701-1 No Valid Registration - Vehicle Operator	0	2	0	0	1	0	0	0	0	0	0	0	3
625 ILCS 5.0/11-402-A Leaving the Scene of an Accident -Vehicle Damage	6	4	3	7	4	4	5	0	0	0	0	0	33
625 ILCS 5.0/11-503-A Reckless Driving	1	0	0	1	1	0	0	0	0	0	0	0	3
625 ILCS 5.0/11-502-B Illegal Transportation of Alcohol -passenger	0	0	0	0	2	1	0	0	0	0	0	0	3
625 ILCS 5.0/11-502-A Illegal Transportation of Alcohol -Driver	0	0	0	1	2	1	2	0	0	0	0	0	6
625 ILCS 5.0/11-501-A-3 Driving Under the Influence - Intoxicating Compound	0	1	0	0	0	1	0	0	0	0	0	0	2
625 ILCS 5.0/11-501-A-4 Driving Under the Influence - Drugs or Combination of Drugs	0	0	0	0	2	0	0	0	0	0	0	0	2
625 ILCS 5.0/11-501-A-6 Driving Under the Influence - Drug, Substance or Compound	0	0	0	0	0	1	0	0	0	0	0	0	1
625 ILCS 5.0/11-501-A-5 Driving Under the Influence - Combined Influence of Alcohol, Drugs, Compunds	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-501-A-1 Driving Under the Influence - BAC .08 or more	2	0	0	4	1	1	0	0	0	0	0	0	8
625 ILCS 5.0/11-501-A-2 Driving Under the Influence - Alcohol	2	0	0	2	2	0	0	0	0	0	0	0	6
720 ILCS 600.0/3.5-A Possession of Drug Paraphernalia	1	0	0	0	0	0	0	0	0	0	0	0	1

Ticket Statistics



Print Date/Time: 08/01/2017 11:46
 Login ID: kwojłowicz
 Statute: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Ticket Type: All

Granite City Police Department
 ORI Number: IL0600700

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
Traffic Totals	266	283	259	215	212	177	170	0	0	0	0	0	1582
Totals	407	469	407	304	287	253	218	0	0	0	0	0	2345

Office of
Richard E. Miller
Chief of Police

Ticket Statistics



Print Date/Time: 08/01/2017 13:12
Login ID: krwojtowicz
Statute: All

From Date: 07/17/2017
To Date: 07/31/2017
Ticket Type: All

Granite City PD
ORI Number: IL0600700

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
Verbal Warning													
625 ILCS 5.0/12-610.2 Electronic Communications Devices	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-804 Failure to Signal When Required	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/12-603.1 Failure to Wear Properly Adjusted and Fastened Seat Safety Belt	0	0	0	0	0	0	1	0	0	0	0	0	1
Verbal Warning Totals	0	0	0	0	0	0	3	0	0	0	0	0	3
Written Warning													
625 ILCS 5.0/12-610.2 Electronic Communications Devices	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/3-401-A* No Valid Registration 3rd and Subq Offense within 1 year	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/3-707 Operating Uninsured Motor Vehicle	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-906 Failed to Yield-Private Road or Drive	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/12-201-B Driving Without Lights When Required	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/3-413-F Operate A Vehicle With Expired Registration 1st and 2nd Offense	0	0	0	0	0	0	1	0	0	0	0	0	1
Written Warning Totals	0	0	0	0	0	0	7	0	0	0	0	0	7
Traffic													
10.48.050 Truck Route Violation	0	0	0	0	0	0	3	0	0	0	0	0	3
625 ILCS Other Traffic Other Traffic Offenses - Digiticket	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/12-610.2 Electronic Communications Devices	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-306 Disregard Traffic Control Device	0	0	0	0	0	0	3	0	0	0	0	0	3
625 ILCS 5.0/11-1204(b) Disobeyed Stop / Yield Sign	0	0	0	0	0	0	10	0	0	0	0	0	10
625 ILCS 5.0/11-804 Failure to Signal When Required	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-708 Improper Lane Usage	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/6-303 LICENSE:Suspended/Revoked	0	0	0	0	0	0	4	0	0	0	0	0	4
625 ILCS 5.0/6-101 No Valid DL Expired more than 6 months	0	0	0	0	0	0	5	0	0	0	0	0	5
625 ILCS 5.0/11-601-A Fail to Reduce Speed/Accident to Avoid Accident	0	0	0	0	0	0	9	0	0	0	0	0	9
625 ILCS 5.0/3-707 Operating Uninsured Motor Vehicle	0	0	0	0	0	0	17	0	0	0	0	0	17
625 ILCS 5.0/12-503-A Obstructed Windshield or Front Side Window	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-710-A Following too Closely - (reasonable and prudent)	0	0	0	0	0	0	1	0	0	0	0	0	1

Page: 1 of 2

Office of
Richard E. Miller
Chief of Police

Ticket Statistics



Print Date/Time: 08/01/2017 13:12
Login ID: krwojtowicz
Statute: All

From Date: 07/17/2017
To Date: 07/31/2017
Ticket Type: All

Granite City PD
ORI Number: IL0600700

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	Totals
625 ILCS 5.0/11-902 Failed to Yield - Turning Left	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-904-C Failed to Yield - Stop or Yield Intersection	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-601-B Speeding	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/12-201-B Driving Without Lights When Required	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-709-A Improper Lane Usage - Laned Roads	0	0	0	0	0	0	3	0	0	0	0	0	3
625 ILCS 5.0/11-901 Failed to Yield at Intersection	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-407-A Failure to Report Accident to Police Authority	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/11-204 Fleeing/Attempt to Elude Police	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/12-603.1-1 Failure to Wear a Properly Adjusted and Fastened Seat Safety Belt - Passenger	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/12-603.1 Failure to Wear Properly Adjusted and Fastened Seat Safety Belt	0	0	0	0	0	0	5	0	0	0	0	0	5
625 ILCS 5.0/6-303-A Driving With Suspended/Revoked Drivers License (Misdemeanor)	0	0	0	0	0	0	2	0	0	0	0	0	2
625 ILCS 5.0/11-402-A Leaving the Scene of an Accident -Vehicle Damage	0	0	0	0	0	0	3	0	0	0	0	0	3
625 ILCS 5.0/11-503-C Reckless Driving - Aggravated	0	0	0	0	0	0	1	0	0	0	0	0	1
625 ILCS 5.0/11-501-A-2 Driving Under the Influence - Alcohol	0	0	0	0	0	0	1	0	0	0	0	0	1
Traffic Totals	0	0	0	0	0	0	83	0	0	0	0	0	83
Totals	0	0	0	0	0	0	93	0	0	0	0	0	93

Case Status and Disposition Summary



Print Date/Time: 08/01/2017 11:51
Login ID: kwojtowicz
Officer: All

From Date: 07/01/2017
To Date: 07/31/2017
Date Type: Assign Date

Granite City Police Department
ORI Number: IL0600700
Assignment: All

Case Status	Total	%
Cleared - Warrant Issued	5	3.7
Closed Lack of Evidence	1	0.74
Closed Lack of Leads	4	2.96
Cleared Lack of Cooperation	0	0
Cleared Unusual	10	7.41
Cleared - Lack of Prosecution	3	2.22
Cleared Arrest	19	14.07
Referred: Other Jurisdiction	3	2.22
Pending Investigation	89	65.93
Unfounded	1	0.74
Total Cases:	135	100

Case Disposition	Total	%
Closed	45	33.33
Open	90	66.67
Total Cases:	135	100

% may not be accurate as they are rounded to two decimals.

Office of
Richard E. Miller
Chief of Police

Case Status and Disposition Summary



Print Date/Time: 08/01/2017 13:11

Login ID: krwojtowicz

Officer: All

From Date: 07/17/2017

To Date: 07/31/2017

Date Type: Assign Date

Granite City PD

ORI Number: IL0600700

Assignment: All

Case Status	Total	%
Exceptional Juvenile	0	0
Exceptional Adult	1	1.2
Fail to File-Juvenile	0	0
Fail to File-Adult	0	0
No Review Requested	0	0
Arrest-Adult	8	9.64
Referred: Other Jurisdiction	1	1.2
Administratively Closed	7	8.43
Pending Investigation	65	78.31
Unfounded	1	1.2
Arrest-Juvenile	0	0
Total Cases:	83	100

Case Disposition	Total	%
Closed	19	23.17
Open	63	76.83
Open Inactive	0	0
Total Cases:	82	100

% may not be accurate as they are rounded to two decimals.

Call For Service By Month



Print Date/Time: 08/01/2017 11:55
 Login ID: kwojtowicz
 Source: All
 Layer: All
 Areas: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Call Type: All

Agency Type: Police, Fire, EMS

Call For Service Type		JAN		FEB		MAR		APR		MAY		JUNE		JULY		AUG		SEP		OCT		NOV		DEC		TOTALS		
		#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	
All Areas:	911 Abandoned	203	1.0	205	1.0	188	0.9	213	1.0	276	1.3	234	1.1	126	0.6	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1445
	911 Emergency	59	0.3	69	0.3	102	0.5	86	0.4	103	0.5	106	0.5	56	0.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	581
	911 Misuse	334	1.6	282	1.4	342	1.7	294	1.4	281	1.4	322	1.6	207	1.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	2062
	911 Transfer	108	0.5	114	0.6	121	0.6	134	0.6	139	0.7	142	0.7	85	0.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	843
	Air Crash	0	0.0	1	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1
	Alarm	91	0.4	59	0.3	92	0.4	106	0.5	115	0.6	91	0.4	55	0.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	609
	Animal	23	0.1	25	0.1	32	0.2	26	0.1	45	0.2	39	0.2	23	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	213
	Arrest on Warrant	69	0.3	65	0.3	75	0.4	58	0.3	69	0.3	87	0.4	29	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	452
	Arson	0	0.0	0	0.0	0	0.0	1	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1
	Assault	0	0.0	2	0.0	1	0.0	2	0.0	4	0.0	4	0.0	3	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	16
	Assist Other Agency	21	0.1	28	0.1	41	0.2	22	0.1	42	0.2	29	0.1	29	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	212
	Battery	14	0.1	16	0.1	18	0.1	11	0.1	12	0.1	20	0.1	9	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	100
	Bomb Threat	0	0.0	0	0.0	0	0.0	1	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	1
	Burglary	19	0.1	49	0.2	14	0.1	37	0.2	66	0.3	49	0.2	45	0.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	279
	Child Custody	7	0.0	14	0.1	13	0.1	14	0.1	18	0.1	14	0.1	9	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	89
	Civil Problem	8	0.0	7	0.0	11	0.1	10	0.0	5	0.0	5	0.0	4	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	50
Criminal Damage	23	0.1	32	0.2	28	0.1	24	0.1	42	0.2	41	0.2	13	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	203	
Death	4	0.0	3	0.0	3	0.0	2	0.0	4	0.0	2	0.0	4	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	22	
Deceptive Practice	21	0.1	16	0.1	24	0.1	22	0.1	33	0.2	18	0.1	13	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	147	
Disturbance	90	0.4	75	0.4	96	0.5	107	0.5	144	0.7	128	0.6	61	0.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	701	
Dog Bite	0	0.0	0	0.0	0	0.0	1	0.0	3	0.0	3	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	4	
Domestic	65	0.3	51	0.2	77	0.4	72	0.3	70	0.3	59	0.3	52	0.3	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	446	
Domestic Battery	3	0.0	10	0.0	3	0.0	4	0.0	7	0.0	5	0.0	1	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	33	
Drug Activity	17	0.1	19	0.1	21	0.1	17	0.1	20	0.1	19	0.1	12	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	125	
Dumping	2	0.0	3	0.0	3	0.0	1	0.0	6	0.0	2	0.0	3	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	20	

Call For Service By Month



Print Date/Time: 08/01/2017 11:55
 Login ID: kwojnowicz
 Source: All
 Layer: All
 Areas: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Call Type: All

Agency Type: Police, Fire, EMS

Call For Service Type	JAN		FEB		MAR		APR		MAY		JUNE		JULY		AUG		SEP		OCT		NOV		DEC		TOTALS
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%	
Duty Roster	49	0.2	46	0.2	48	0.2	40	0.2	47	0.2	53	0.3	30	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	313
EMS	367	1.8	307	1.5	350	1.7	361	1.7	416	2.0	400	1.9	202	1.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	2403
Escort	23	0.1	19	0.1	25	0.1	21	0.1	23	0.1	25	0.1	11	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	147
Fight	11	0.1	16	0.1	23	0.1	10	0.0	29	0.1	22	0.1	5	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	116
Fire	37	0.2	29	0.1	31	0.1	46	0.2	69	0.3	52	0.3	24	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	288
Fireworks	2	0.0	2	0.0	0	0.0	0	0.0	0	0.0	9	0.0	82	0.4	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	95
Harassment/Stalking	31	0.1	40	0.2	39	0.2	41	0.2	44	0.2	51	0.2	27	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	273
Illegal Parking	28	0.1	32	0.2	34	0.2	18	0.1	17	0.1	26	0.1	18	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	173
Inoperable Vehicle	7	0.0	12	0.1	29	0.1	6	0.0	5	0.0	8	0.0	5	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	72
Juvenile	25	0.1	38	0.2	42	0.2	50	0.2	44	0.2	37	0.2	22	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	258
Lift Station	6	0.0	6	0.0	21	0.1	59	0.3	115	0.6	39	0.2	8	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	254
Lock Out	7	0.0	11	0.1	12	0.1	1	0.0	7	0.0	7	0.0	6	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	51
Loud Music/Party	9	0.0	11	0.1	11	0.1	17	0.1	21	0.1	14	0.1	4	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	87
Mental Subject	16	0.1	17	0.1	16	0.1	14	0.1	14	0.1	9	0.0	7	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	93
Message	8	0.0	16	0.1	9	0.0	3	0.0	14	0.1	7	0.0	5	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	62
Motorist Assist	17	0.1	6	0.0	24	0.1	21	0.1	11	0.1	20	0.1	15	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	114
Notify Other Agency	24	0.1	22	0.1	17	0.1	40	0.2	42	0.2	27	0.1	12	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	184
Ordinance Violation	22	0.1	34	0.2	23	0.1	17	0.1	26	0.1	29	0.1	8	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	159
Other Service	33	0.2	37	0.2	25	0.1	28	0.1	40	0.2	44	0.2	25	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	232
Prisoner to Court	2	0.0	2	0.0	1	0.0	1	0.0	1	0.0	0	0.0	2	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	9
Prisoner Transport	25	0.1	24	0.1	26	0.1	23	0.1	21	0.1	27	0.1	14	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	160
Reckless Driver	18	0.1	29	0.1	19	0.1	45	0.2	38	0.2	34	0.2	19	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	202
Recover Property	21	0.1	23	0.1	24	0.1	22	0.1	25	0.1	34	0.2	16	0.1	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	165
Remove Subject(s)	59	0.3	51	0.2	62	0.3	65	0.3	72	0.3	97	0.5	34	0.2	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	440
Roadway Obstructed	7	0.0	10	0.0	5	0.0	9	0.0	13	0.1	15	0.1	6	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	65



Call For Service By Month

Print Date/Time: 08/01/2017 11:55
 Login ID: kwojowicz
 Source: All
 Layer: All
 Areas: All

From Date: 01/01/2017
 To Date: 07/31/2017
 Call Type: All

Agency Type: Police, Fire, EMS

Call For Service Type	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC	TOTALS
	# %	# %	# %	# %	# %	# %	# %	# %	# %	# %	# %	# %	
Robbery	2 0.0	5 0.0	2 0.0	3 0.0	4 0.0	5 0.0	3 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	24
Runaway/Missing	6 0.0	11 0.1	9 0.0	11 0.1	16 0.1	2 0.0	7 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	62
Sex Offense	11 0.1	5 0.0	8 0.0	5 0.0	13 0.1	8 0.0	2 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	52
Shots Fired	6 0.0	5 0.0	9 0.0	8 0.0	11 0.1	10 0.0	3 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	52
Solicitor	3 0.0	2 0.0	3 0.0	5 0.0	3 0.0	5 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	21
Squad Serviced	29 0.1	24 0.1	25 0.1	14 0.1	17 0.1	21 0.1	6 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	136
Standby	14 0.1	22 0.1	23 0.1	25 0.1	38 0.2	31 0.1	17 0.1	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	170
Stolen Vehicle	17 0.1	8 0.0	9 0.0	15 0.1	18 0.1	16 0.1	6 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	89
Suspicious Activity	192 0.9	261 1.3	225 1.1	216 1.0	332 1.6	324 1.6	186 0.9	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	1736
Suspicious Vehicle	55 0.3	67 0.3	69 0.3	48 0.2	84 0.4	52 0.3	39 0.2	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	414
Telephone Harassment	1 0.0	0 0.0	0 0.0	1 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	2
Theft	91 0.4	111 0.5	69 0.3	86 0.4	135 0.7	138 0.7	62 0.3	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	692
Traffic Controls	10 0.0	2 0.0	2 0.0	1 0.0	10 0.0	6 0.0	4 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	35
Traffic Crash	79 0.4	78 0.4	90 0.4	97 0.5	104 0.5	83 0.4	53 0.3	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	584
TS	191 0.9	240 1.2	187 0.9	130 0.6	109 0.5	127 0.6	97 0.5	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	1081
Unknown	2 0.0	2 0.0	0 0.0	0 0.0	1 0.0	0 0.0	2 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	7
Vehicle Tow	0 0.0	1 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	1
Weapon	4 0.0	2 0.0	7 0.0	9 0.0	7 0.0	6 0.0	4 0.0	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	39
Welfare Check	51 0.2	45 0.2	51 0.2	61 0.3	89 0.4	59 0.3	45 0.2	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	401
Totals	2799 13.5	2876 13.9	3009 14.6	2958 14.3	3649 17.7	3395 16.4	1982 9.6	0 0.0	0 0.0	0 0.0	0 0.0	0 0.0	20668

Call For Service By Disposition



Print Date/Time: 08/01/2017 11:54
 Login ID: kwojtowicz
 Layer: All
 Areas: All

From Date: 01/01/2017 00:00(Continuous)
 To Date: 07/31/2017 23:59
 Disposition: All

Agency Type: Police, Fire, EMS

Call Disposition	JAN	FEB	MAR	APR	MAY	JUNE	JULY	AUG	SEP	OCT	NOV	DEC	TOTALS
Traffic Crash	47	58	56	67	55	48	32	0	0	0	0	0	363
Change Status	0	1	0	1	2	1	0	0	0	0	0	0	5
Alarm	47	29	37	46	42	35	27	0	0	0	0	0	263
False Alarm	32	21	34	42	37	29	15	0	0	0	0	0	210
Duplicate Call	19	10	37	14	16	38	10	0	0	0	0	0	144
EMS	331	287	314	312	381	371	187	0	0	0	0	0	2183
FIRE	30	26	26	37	59	46	17	0	0	0	0	0	241
Assist Other Agency	5	2	4	5	11	9	8	0	0	0	0	0	44
Inoperable Vehicle Report	2	4	6	1	2	3	1	0	0	0	0	0	19
Warrant Arrest	67	64	70	66	72	87	29	0	0	0	0	0	455
Traffic Arrest	167	210	171	111	88	96	93	0	0	0	0	0	936
Rental Property	185	195	188	214	242	205	113	0	0	0	0	0	1342
CAD Incident Report	1614	1730	1799	1826	2324	2155	1307	0	0	0	0	0	12755
Incident Report	269	259	262	229	324	308	178	0	0	0	0	0	1829
Total Dispositions	2815	2896	3004	2971	3655	3431	2017	0	0	0	0	0	20789
Total Calls For Service	2625	2731	2853	2812	3438	3242	1898	0	0	0	0	0	19599

*Totals may be larger than total number of calls due to multiple dispositions.

ORDINANCE #
AN ORDINANCE AUTHORIZING THE GRANITE CITY SCHOOL RESOURCE OFFICER
HIGH SCHOOL PROGRAM AGREEMENT FOR THE 2017-2018 SCHOOL YEAR

WHEREAS, Granite City is a home rule unit pursuant Article 7, Section 6, of the Illinois State Constitution of 1970; and

WHEREAS, Community Unit School District # 9 provides quality education in the public schools throughout the City of Granite City; and

WHEREAS, in order to promote the public safety and the academic environment of public schools, the City of Granite City may assign a uniformed police officer to the High School of School District # 9, under the School Resource Officer Program (SRO); and

WHEREAS, the Granite City City Council hereby finds it is in the best interests of the City of Granite City that a written SRO agreement with the School District be executed, such that the School District accepts a share of the liability associated with the on-the-job injuries that may be suffered by a school resource officer.

NOW, therefore, be it ordained by the City Council of the City of Granite City, Illinois, that the Office of the Mayor is authorized and directed to enter into a School Resource Officer Program agreement, for the 2017- 2018 academic school year with Community Unit School District No. 9, with substantially the same terms as described in the attached draft agreement.

APPROVED this _____ day of August, 2017.

APPROVED: _____
Mayor Edward Hagnauer

ATTEST: _____
City Clerk, Judy Whitaker

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**AGREEMENT BETWEEN GRANITE CITY COMMUNITY UNIT SCHOOL DISTRICT No. 9 AND THE
GRANITE CITY POLICE DEPARTMENT, CITY OF GRANITE CITY, IL, FOR THE SCHOOL RESOURCE
OFFICER PROGRAM FOR GRANITE CITY HIGH SCHOOL**

The City of Granite City, a municipal corporation and body politic, and Community Unit School District No. 9, (CUSD9) an Illinois School District and body politic, agree as follows:

1. A school resource officer program is hereby established for the Granite City Granite City High School in Granite City, IL, for the purpose of providing an on duty, uniformed police officer on the campus of the school, during the Fall and Spring terms of the school year 2017-2018.

2. The Police Chief shall propose three candidates for the SRO position to CUSD9, and the Superintendent of Schools of CUSD 9, and the Police Chief, shall jointly select the SRO among the candidates provided. With the assistance of CUSD 9, the Police Department shall assign one regularly employed police officer to Granite City High School, known as the "SRO". The superintendent of schools (superintendent) or his/her designee may on occasion ask the SRO to perform duties at the other schools in Granite City as well. The SRO's Office of Operations will be based at the high school. The SRO shall be assigned to the school on a full time basis of eight hours per day, for the same work schedule as a nine month administrator of the school, in accordance with the District-approved school calendar. Daily starting and ending work times for the SRO shall be mutually agreed upon between CUSD 9 and the Police Department. The SRO may be temporarily re-assigned by the Police Department during holidays, vacations, or during a period of emergency.

3. The SRO shall coordinate all of his/her activities at the Granite City High School with the superintendent of schools or the superintendent's designee, and will seek permission, advice, and guidance from the superintendent prior to enacting any new program within the school. The SRO shall promote law enforcement, promote crime prevention, seek to provide reasonable protection for the academic environment, and promote an atmosphere of safety, in

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the school. When requested by the superintendent or his designee, the SRO shall attend conferences with students, parents, and faculty members. The SRO may be assigned investigations relating to the school or its students. The superintendent or his designee may occasionally assign the SRO to hall assignment, to promote safety. The SRO shall maintain detailed and accurate records of the operations of the SRO, and such other reports as are required by the School Superintendent's designee or the Police Department. The SRO shall take law enforcement action, but shall not act as a school disciplinarian where the incident is not a violation of the law. The duties of the SRO are listed in the attached Exhibit A.

4. CUSD 9 shall provide the SRO an air conditioned and properly lighted private office, a telephone which may be used for general business and law enforcement purposes, a location for files and records which can be properly locked and secured, a desk with drawers, chair, worktable, filing cabinet, office supplies, and secure computer or the equivalent. Additional equipment, where deemed necessary by the police, to be supplied by the Police Department. Internet use at the school by the SRO shall be limited by School Internet Policy.

5. CUSD 9 agrees to pay no less than one hundred eighty work days' salary and benefits of the assigned SRO, to the City out of the average annual 260 work days of a police officer of Granite City, for the nine months of the school year. The City of Granite City shall pay all training costs, overtime wages, uniform, and equipment maintenance normally provided by the City, and the remainder of approximately three month's salary and benefits for the SRO. The SRO's "benefits" so divided between CUSD 9 and the City include pension contributions, health insurance (including premium contributions to the Union under the SRO's collective bargaining agreement), FICA, and medicare payments. In the event the SRO actually works more than 180 days for CUSD9, then CUSD9 shall pay the City the additional per diem salary and benefits of that SRO.

6. While on school property, the SRO is under the immediate direction and supervision

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of the superintendent of schools or his/her designee, except in the event of police emergency. The Police Department shall promptly notify the superintendent of schools or his designee of the nature of the emergency situation and reason for ordering SRO off school property. Therefore, the SRO shall not leave school property during school hours except in the event of emergency, or with the permission of the superintendent or the superintendent's designee. To help prevent disagreement and confusion, the parties agree that it shall be the responsibility of the superintendent to make both the Police Department and the SRO aware at all times of the identities of the superintendent's designees.

7. In the event the SRO claims to have suffered an injury, arising out of and in the scope of his employment while on duty or in the course of his/her duties as an SRO officer or on CSUD 9 property, CUSD 9 and the City of Granite City agree to split equally all costs associated with the medical care, temporary total disability, permanency award/damages, wage differential, costs and legal fees associated with the defense of the claim, and any other benefits arising under the Illinois Workers Compensation Act, subject to the following.

- A. CUSD 9's liability to the City for the claims of injury suffered by the SRO, shall be capped at \$50,000.00 total, under this section 7.
- B. The City shall advance all expenses, fees, awards, payments, and costs referenced under this section 7 of this agreement, and bill CUSD 9 quarterly for reimbursement under this section, with an itemized invoice of the reimbursement requested.
- C. CUSD 9 will cooperate in the investigation and defense of any claim arising out of the SRO's claim of injury. The City will timely respond to reasonable requests for information by CUSD 9 associated with such claims. Because the City would be responsible for all amounts determined to be owed the SRO in excess of \$100,000.00 under this section 7, the City shall

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have the sole right to select and direct defense counsel, and to determine whether to settle, defend, or appeal any claim before an Arbitrator or Court. The City will notify CUSD 9 in advance, before settling any claim referenced under this section 7 of this agreement. Each party will notify the other party of any work related injury to the SRO, and of any notice of application of adjustment of a workers' compensation claim by an SRO, within 24 hours of receipt of actual notice of the injury, or receipt of the application of adjustment of a claim. Failure to so notify within 24 hours will not invalidate or affect the other rights and duties of the parties to this agreement.

8. This agreement may be terminated by either party after 30 calendar days' written notice of breach to the other party. This agreement may be terminated without cause by either party upon 60 calendar days' written notice. In the event this agreement is terminated, pro rata reimbursement based on the assigned SRO's per diem salary and benefits will be made by CUSD 9 to the City of Granite City for all SRO services performed to the date of termination, per section 5 of this agreement.

9. In the event the superintendent of schools determines that a particular SRO is not effectively performing SRO duties and responsibilities, the superintendent of schools shall advise the Police Chief promptly. The Police Chief and superintendent (and/or their designees) shall meet with the SRO to mediate or resolve any problems which may exist. Thirty days after commencement of such mediation, if the problem has not been resolved, or in the event the Police Chief waives mediation, the SRO shall be promptly removed from the school. The Police Chief shall then propose candidates for replacement of the SRO to CUSD 9, and the superintendent of schools of CUSD 9 and the Police Chief shall then jointly select the replacement SRO, among the 3 candidates provided by the Chief of Police. Where replacement

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is not deemed necessary under this section 9 of this agreement, the Police Chief may dismiss, discipline, or temporarily re-assign a SRO.

10. In the event of the resignation, dismissal, or reassignment of a SRO, or in the case of long-term absences by a SRO, the Police Chief shall provide a replacement for the SRO subject to the Superintendent's approval, within 30 school days of receiving notice of such absence, dismissal, resignation, or reassignment. CUSD 9's duty to reimburse the City for the SRO's salary or benefits for any such absence shall be prorated, based on that SRO's per diem salary and benefits. The Chief of Police shall assign a temporary replacement SRO, when requested by the superintendent, for a period of less than thirty (30) days.

11. CUSD 9 reserves the right to, at any time, direct any candidate for SRO or SRO appointed to attend a physical examination, to be paid for by CUSD 9, and the report of the physician will be promptly shared with the City.

Superintendent of Schools
Community Unit School District No. 9

President of CUSD No. 9 School Board

Mayor Edward Hagnauer

Chief of Police

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Duties and Responsibilities of SRO

1. The SRO shall coordinate all of his/her activities with the Administrative Assistant for Secondary Education, or his or her designee, principal, and staff members concerned, and will seek permission, advice, and guidance prior to enacting any program within the school.
2. Conduct investigations and take law enforcement action as may be required and permitted pursuant to the provisions of the Illinois Compiled Statutes (including the Juvenile Court Act), the Ordinances of the City of Granite City and other legal mandates.
 - a) Take appropriate action against intruders and trespassers on school property.
 - b) Provide reasonable protection for the academic environment and assist toward the maintenance of an atmosphere of safety, which is conducive to teaching and learning.
3. Assist the administration in the development of plans and strategies, which minimize dangerous situations including those related to student or community unrest, which impact the schools.
4. Provide and encourage programs and presentations designed to promote student understanding of the law and other public safety issues with the intended goal of allowing young people to become better informed and effective citizens within and outside the academic environment.
5. Provide students and their families, administrators, staff and faculty, with information concerning various community support agencies, including:
 - a) Family counseling services
 - b) Drug and alcohol treatment facilities
 - c) Psychological services
 - d) Legal assistance
6. When requested by the principal, or his or her designee, the SRO shall attend parent/faculty meetings to solicit support and understanding of the program.
7. The SRO shall make himself/herself available for conference with students, parents and faculty members in order to assist them with problems of law enforcement or crime prevention nature.
8. Provide the students with a confidential source of counseling regarding various social problems, especially those relating to the criminal justice system (e.g. drug abuse, sexual abuse, domestic violence, physical or mental abuse, neglect).
9. Work in cooperation with other law enforcement and various agencies of government including the State's Attorney's Office and the Department of Children and Family Services.

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10. Other duties as may be assigned by the Police Chief or school authorities.
11. Attend school functions, including athletic events, concerts, and plays, so as to achieve the purpose of this policy.
12. The SRO shall take law enforcement action as required. As soon as practicable, the SRO shall make the principal or his or her designee of the school aware of such action. At the his or her request, the SRO shall take appropriate law enforcement action against intruders and unwanted guests who may appear at the school and related school functions, to the extent that the SRO may do so under the authority of the law. Whenever practicable, the SRO shall advise the principal or his or her designee before requesting additional police assistance on campus.
13. The SRO may be assigned investigations relating to runaways, truancy, thefts, acts of violence, illegal drug activities, or other offenses, provided such investigations relate to the students attending the school to which the SRO is assigned.
14. The SRO shall maintain detailed and accurate records of the operation of the School Resource Officer Program and shall submit other reports of an instructional nature as required by the principal or school staff.
15. The SRO shall not act as a school disciplinarian, as disciplining students is school responsibility. However, if the principal believes an incident is a violation of the law, the principal or his or her designee may contact the SRO and the SRO shall then determine whether law enforcement action is appropriate. SRO's are not to be used for regularly assigned lunchroom duties, hall monitors, or other monitoring duties. If there is a problem area, the SRO may assist the school until the problem is solved.

ORDINANCE NO.

ADJUDICATION PROCEDURE FOR UNLAWFUL STANDING, PARKING OR
CONDITION OF MOTOR VEHICLES UNDER 10.26 AND 10.34 OF CITY CODE

WHEREAS, the City of Granite City is a home rule unit pursuant to Article VII, Section 6, of the Illinois State Constitution of 1970; and

WHEREAS, 65 ILCS 5/1-2.1-2 et seq. authorizes municipalities to provide by Ordinance for a system of administrative adjudication of Municipal Code violations, to the extent permitted by the Illinois Constitution and State law; and

WHEREAS, under said system of administrative adjudication, known as an alternative ticket program, an alternative ticket may be issued at the discretion of a City Police Officer, certain City Fire Department personnel, or City Inspectors, in lieu of arrest and prosecution before the Circuit Court; and

WHEREAS, under said alternative ticket program, instead of a disputed charge being heard and adjudicated by a Circuit Court Judge or Associate Judge appointed under Article VI, Sections 7 and 8, of the Illinois State Constitution of 1970, a disputed charge under the alternative ticket program is heard and adjudicated by a hearing officer or an administrative law judge in an administrative proceeding; and

WHEREAS, since at least 1990, the City of Granite City has by Ordinance authorized an alternative ticket program, per Ordinance 4499; and

WHEREAS, on September 9, 1991, in Ordinance 4603, the Granite City City Council expanded the list of offenses that may be prosecuted under the alternative ticket program of the City of Granite City to include Ordinance violations for littering, disorderly conduct, and alcoholic beverage possession by Minors, among other offenses; and

WHEREAS, on December 22, 1998, the Granite City City Council amended the alternative ticket program by adopting Ordinance 7048; and

WHEREAS, in said Ordinance 7048, adopted in 1998, the Granite City City Council established requirements for the qualifications of the hearing officer, including the requirement that said hearing officer be an attorney licensed in the State of Illinois for at least 3 years, and said Ordinance further established procedural safeguards for the contents of notices of violation and described the conduct of administrative hearings; and

WHEREAS, 625 ILCS 5/11-208.3 now authorizes Illinois municipalities to create by Ordinance a system of administrative adjudication, or an alternative ticket program, for motor vehicle parking violations; and

WHEREAS, the Granite City City Council hereby finds the public benefits from the prosecution of certain minor Ordinance violations, such as parking violations, through the alternative ticket program instead of through the Circuit Court, because the alternative ticket program hearings are generally conducted weekly, have fewer continuances, and shorter continuances when allowed, resulting in faster prosecution and faster resolution of Ordinance violations; and

WHEREAS, the Granite City City Council hereby finds the public benefits from the prosecution of certain minor Ordinance violations through the alternative ticket program instead of through Circuit Court, because the fines ultimately assessed against violators tend to be much lower in the alternative ticket program compared to the Circuit Court, thus promoting compliance with City Ordinances at a lower cost of administration and lower fines levied against violators of Ordinances.

NOW, THEREFORE, be it hereby Ordained and decreed by the City Council of the City of Granite City, Madison County, Illinois, that the following new Ordinance shall be codified in the

Granite City Municipal Code as Section 1.24.060:

1. Section 1.24.060 - Alternative Ticket Program for Parking Tickets.

A. The purpose of the administrative system of enforcement of parking tickets is the fair and efficient enforcement of City Ordinances and directives concerning lawful parking of motor vehicles within the boundaries of the City of Granite City. The proceeding for administrative adjudication and prosecution of violations of Sections 10.26 and 10.34 provisions of the Granite City Municipal Code, as the same now exists or may hereafter be amended, may be conducted upon the issuance of an alternative ticket, as herein provided. Provisions of this Ordinance shall not preclude the Mayor and City Council from using any other method to enforce ordinances of the City.

B. The Chief of Police of the City of Granite City shall be the “Traffic Compliance Administrator” under this Ordinance to administer the program, to perform all duties hereunder, including but not limited to submitting notices as required hereunder, and depositing all funds to the City Treasurer, and in control over the administrative adjudication system under this Ordinance.

C. The “Hearing Officer” as appointed by the Mayor and City Council will conduct hearings for violations of City Code Sections 10.26 and 10.34 under this alternate ticket system.

D. (i) A Police Officer, full time, part time or auxiliary, may issue a notice of violation of the provisions of Code Sections 10.26 and 10.34, and the person issuing such violation notice shall sign the notice at the time it is issued, certifying as to the correctness of the facts entered on the notice. It shall specify the date, time and place of violation, the particular section of the City Code violated, the fine and any penalty that may be assessed for late payment, the vehicle make and state registration number, and the identification number of the person issuing the notice. It shall contain information as to the availability of a hearing in which the violation may be contested on its merits,

and shall specify the time and manner in which a hearing may be had.

(ii) Notwithstanding the provisions of any other City Ordinance in conflict with this provision, fines for Notices of violation issued pursuant to this Ordinance shall be Twenty Dollars (\$20) if paid within ten days of the issuance of said Notice, or Fifty Dollars (\$50) if paid after ten days but before thirty days of the issuance date of said Notice. Payment of the said fine to the Granite City Treasurer, as provided for herein, shall operate as a final disposition of the violation proceedings.

E. A violation notice authorized by this Section shall be served upon an alleged violator by:

(i) Affixing the original or facsimile of the notice to an unlawfully standing or parked vehicle or a vehicle in unlawful condition, or

(ii) Handing the original or facsimile notice to the registered owner, operator or lessee of the vehicle, if present.

(iii) A true copy of the violation notice shall also be sent by regular United States mail addressed to the registered owner or lessee of the cited vehicle as recorded with the Illinois Secretary of State, or the lessee of the said motor vehicle within thirty days after the said Secretary of State, or the lessor of the cited vehicle, notifies the City of the identity of the owner or lessee, but not later than 90 days after the date of the violation, except in the case of a lessee of the cited motor vehicle, service of the violation notice may occur no later than 210 days after the date of the alleged violation. Service of the violation notice shall be deemed complete as of the date of deposit in the United States mail.

(iv) A second notice of violation shall be sent by first class United State mail to the owner or lessee of the motor vehicle, specifying the date and location of the violation cited in the violation notice, the City Code section violated, the motor vehicle make and state registration number, the fine and any penalty that may be assessed for late payment, or both, the availability of a hearing in which the violation may be contested on its merits, and the day, time and place the hearing may be had. The notice shall also state failure to pay the indicated fine and any applicable penalty, or to appear at the hearing on the merits at the time specified, will result in a final determination of violation liability for the cited violation in the amount of fine or penalty indicated, and upon a final determination of violation liability for the failure, and the exhaustion of, or the failure to exhaust, available administrative or judicial procedures for review, any unpaid fine or penalty, or both, will constitute a debt due

and owing the City.

F. At the hearing, the violation notice that is issued, signed attesting to the correctness of all facts entered on the violation notice, and served as required, shall be prima facie evidence of the correctness of the facts shown on the violation notice. Such notice, or copy shall be admissible in any subsequent administrative or legal proceedings.

G. An opportunity for a hearing for a registered owner or lessee of the vehicle cited in violation of Sections 10.26 or 10.34 whereby the owner may contest the merits of the alleged violation, shall be made available, during which formal or technical rules of evidence shall not apply. A lessee of a vehicle cited in violation hereunder shall be provided the same opportunity for a hearing of the same kind afforded the registered owner. The hearing shall be recorded and the Hearing Officer is empowered to administer oaths and secure by subpoena both the attendance and testimony of witnesses and the production of relevant books and papers. Persons appearing at the hearing may be represented by counsel at their own expense. All persons, following final determination of violation, shall have 25 calendar days within which to pay the fine and/or penalty due.

H. If the alleged violator is a non-resident of the City of Granite City, he shall be permitted to contest the merits of the alleged violation without attending the hearing in person by participating during the hearing by telephone or by Skype. It is the responsibility of the alleged violator seeking to contest the merits of the alleged violation, to provide a working phone number or Skype address for the date and time set by the Traffic Compliance Administrator.

I. If the violation is confirmed by the finding of the Hearing Office, a fine or penalty may be imposed against the violator as provided by Sections 10.26 or 10.34 for the violation, but not

to exceed two hundred fifty dollars (\$250.00) for each violation so found, unless timely paid per paragraph D (ii), above.

J. (i) A notice of final determination shall be sent following a final determination under this Ordinance and the conclusion of judicial review procedures, if taken. The notice shall state that the unpaid fine and any applicable penalty is a debt due and owing the City of Granite City. The notice shall contain warnings that failure to pay any such fine or penalty due and owing within the time specified may result in the City filing a petition in the Circuit Court to have the unpaid fine and penalty rendered a judgment.

(ii) A separate notice shall be given to a person who fails to pay fines and/or penalties for 10 or more violations determined under this Ordinance, which notice shall state that the person owing such fines and/or penalties shall pay the amounts due within 45 calendar days or the City will send notice to the Illinois Secretary of State that the said person is eligible for initiation of suspension proceedings under Section 6-306.5 of the Illinois Vehicle Code. This notice shall be sent by first class United States mail, postage prepaid, to the address recorded with the Illinois Secretary of State, or, if any notice to that address is returned as undeliverable, to the last known address recorded in a United States Post Office approved database. The notice shall also state that the person may obtain a photostatic copy of the original tickets imposing a fine or penalty by sending a self addressed, stamped envelope to the City along with a request for the said copy.

K. A petition to set aside a determination of violation of this ordinance may be filed by a person owing an unpaid fine or penalty within fifteen days following the issuance of the notice of final determination by the Hearing Officer. The grounds for the petition is limited to (A) the person not having been the owner or lessee of the cited vehicle on the date of cited violation, (B) the owner or lessee has paid the fine and/or penalty for the violation in question, and (C) excusable failure to appear at or request for a hearing. After the final determination is set aside by the Hearing Officer upon a showing of just cause, the owner or lessee shall be provided with a hearing on the merits of that violation.

L. Judicial review of a final determination under this Ordinance shall be subject to the provisions of the Illinois Administrative Review Act.

M. The provisions of this Ordinance shall apply only to alternate tickets issued for violations under City Code Sections 10.26 and 10.34, and all ordinances and parts of ordinances in conflict herewith are hereby expressly repealed.

2. This Ordinance shall take effect 30 days after passage, and may be published in pamphlet form by the City Clerk.

ADOPTED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY, ILLINOIS ON THE _____ DAY OF _____, 2017

APPROVED BY THE MAYOR OF THE CITY OF GRANITE CITY, ILLINOIS, ON THE _____ DAY OF _____, 2017.

APPROVED:

ATTEST:

MAYOR

CITY CLERK

88493

Granite City Fire Department

2300 Madison Ave.. Granite City, IL. 62040

Administered Meds Count

From: 07/01/2017 To: 07/31/2017

Mutual Aid Assignments Provided	2
Abbott Ambulance	1
Long Lake FPD	1

Mutual Aid Assignments Received 0

Total EMS Assignments Provided		418
4440-02	12	2.9 %
4443-01	218	52.2 %
4447-03	186	44.5 %
4449-04	2	0.5 %

No Patient At Scene Assignments	24
AUG 24 2017	

Call Volume Day of Week Analysis		418
Monday	83	19.9 %
Tuesday	56	13.4 %
Wednesday	51	12.2 %
Thursday	61	14.6 %
Friday	55	13.2 %
Saturday	58	13.9 %
Sunday	54	12.9 %

Call Volume by Hour Analysis		418
0	13	3.1 %
1	8	1.9 %
2	10	2.4 %
3	6	1.4 %
4	7	1.7 %
5	12	2.9 %
6	17	4.1 %
7	14	3.3 %
8	13	3.1 %
9	20	4.8 %
10	22	5.3 %
11	27	6.5 %
12	23	5.5 %
13	14	3.3 %
14	27	6.5 %
15	28	6.7 %
16	27	6.5 %
17	28	6.7 %
18	19	4.5 %
19	22	5.3 %
20	15	3.6 %
21	21	5.0 %
22	12	2.9 %
23	13	3.1 %

Miles to Scene Analysis	0
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Miles to Destination Analysis		304
.1 - 5	238	78.3 %
05 - 10	7	2.3 %
10 - 15	51	16.8 %
15 - 20	6	2.0 %
20 - 25	2	0.7 %

Miles to Base Analysis	0
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Crew Shift Assignments Analysis			418
1	141	33.7 %	
2	149	35.6 %	
3	128	30.6 %	

Responded From Assignments Analysis			418
Hospital	27	6.5 %	
On Street in City	47	11.2 %	
On Street out of City	5	1.2 %	
Station 1	203	48.6 %	
Station 3	136	32.5 %	

District Assignments Analysis			396
Non-Resident	65	16.4 %	
Resident	331	83.6 %	

Location City Analysis			418
GRANIT CITY	1	0.2 %	
GRANITE	2	0.5 %	
GRANITE CITY	412	98.6 %	
GRANITE CTY	1	0.2 %	
Grnite City	1	0.2 %	
PONTOON BEACH	1	0.2 %	

Location County Analysis			418
MADISON	417	99.8 %	
Madsion	1	0.2 %	

Location Type Analysis			418
Home / Residence	241	57.7 %	
Farm / Ranch	4	1.0 %	
Mine / Quarry	1	0.2 %	
Office / Business / Ind	16	3.8 %	
Recreational / Sports	2	0.5 %	
Street / Highway	37	8.9 %	
Public Building / Area	44	10.5 %	
Residential Institution	17	4.1 %	
Other Specified Location	53	12.7 %	
Education Facility	2	0.5 %	
Not Applicable	1	0.2 %	

EMS Assignments Response Type Analysis			418
911 Response (Scene)	406	97.1 %	
Interfacility Transfer	2	0.5 %	
Interfacility Transport	3	0.7 %	
Medical Transport	5	1.2 %	
Mutual Aid	2	0.5 %	
Public Assistance/Other Not Listed	1	0.2 %	
Standby	1	0.2 %	

EMS Assignments Response Mode Analysis			418
Non Emergency No Lights or Siren	38	9.1 %	
Emergency Downgraded No Lights or Siren	1	0.2 %	
Non Emergency Upgraded Lights and Siren	1	0.2 %	
Emergency With Lights and Siren	377	90.2 %	
Not Applicable	1	0.2 %	

EMS Assignments Transport Type Analysis			396
D.O.A.	5	1.3 %	
Patient Refused Care	80	20.2 %	
Treat/Transfer Care	2	0.5 %	
Treat/Transport	308	77.8 %	
Treat/Transport by Car	1	0.3 %	

Destination Analysis

396

*No Transport	86	21.7 %
*Residence	7	1.8 %
Anderson Hospital Maryville	12	3.0 %
*Gateway Regional Medical Center	234	59.1 %
Touchette Regional Hospital, Inc. Centreville	1	0.3 %
St. Elizabeth's Hospital	1	0.3 %
Christian Hospital Northeast	2	0.5 %
John Cochran VA- St. Louis	2	0.5 %
VA Med Center Jefferson Barracks	1	0.3 %
St. Louis University Hospital - Main	13	3.3 %
SSM Cardinal Glennon Children's Hospital	5	1.3 %
St. Louis Children's Hospital	1	0.3 %
Barnes-Jewish Hospital - South	21	5.3 %
St. Mary's Hospital	1	0.3 %
*Granite Nursing & Rehab	4	1.0 %
The Fountains	4	1.0 %
Fountainview Memory Center	1	0.3 %

Destination Analysis (Trauma)

63

*No Transport	14	22.2 %
Anderson Hospital Maryville	3	4.8 %
*Gateway Regional Medical Center	32	50.8 %
St. Louis University Hospital - Main	5	7.9 %
SSM Cardinal Glennon Children's Hospital	2	3.2 %
Barnes-Jewish Hospital - South	7	11.1 %

Destination Determination Analysis

396

Closest Facility (None Below)	145	36.6 %
Not Applicable	84	21.2 %
Patient / Family Choice	133	33.6 %
Patient physician choice	25	6.3 %
Law Enforcement Choice	3	0.8 %
Medical Control	2	0.5 %
Other	4	1.0 %

Insurance Providers Analysis

396

COVENTRY HEALTH PLAN OF MO	1	0.3 %
AARP Medicare Complete	1	0.3 %
AARP uhc	1	0.3 %
Advantra coventry	2	0.5 %
Advantra GHP	2	0.5 %
Advantra Gold Advantage	2	0.5 %
Advantra Medicare HMO	1	0.3 %
Aetna	3	0.8 %
Aetna Life and Casualty Other	2	0.5 %
Anthem Blue Cross	2	0.5 %
BCBS	3	0.8 %
BCBS IL	3	0.8 %
BCBS KS	1	0.3 %
BCBS PENNSYLVANIA	1	0.3 %
BCBS TENNESSEE	1	0.3 %
Blue Choice HMO	1	0.3 %
Blue Cross MO	1	0.3 %
Cigna	1	0.3 %
Cigna Other	1	0.3 %
EHA4health	1	0.3 %
ESSENCE	1	0.3 %
ESSENCE HEALTHCARE	1	0.3 %
GEHA4HEALTH	1	0.3 %
GHP	1	0.3 %
Harmony	2	0.5 %
Harmony Health Plan	11	2.8 %
Harmony health plan il	1	0.3 %
Harmony healthplan	2	0.5 %
Healthlink	1	0.3 %

Healthlink Open Access	1	0.3 %
Human Gold Choice	1	0.3 %
Humana GOLD CHOICE	2	0.5 %
Humana Gold Plus	1	0.3 %
Humana HMO	1	0.3 %
Humana medicare	1	0.3 %
Madison Co Govt IBCCP	1	0.3 %
Medicaid Illinois	16	4.0 %
Medicaid MO	2	0.5 %
Medicaid Other	2	0.5 %
Medicare A and B	1	0.3 %
Medicare A B	1	0.3 %
Medicare advantage	1	0.3 %
Medicare Advantage UHC	3	0.8 %
Medicare ADVANTAGEUHC	3	0.8 %
Medicare COMPLETE	12	3.0 %
Medicare complete AARO	1	0.3 %
Medicare HMO	5	1.3 %
Medicare Mutual Omaha PO 1602	117	29.5 %
Medicare Mutual Omaha PO 2347	1	0.3 %
Medicare Part A and B	2	0.5 %
Meridian	5	1.3 %
MerIDIAN HEALTH PLAN	25	6.3 %
Meridian healthplan	2	0.5 %
Missouri MEDICAID	1	0.3 %
Molina	2	0.5 %
Molina healthcare	1	0.3 %
Molina Healthcare of IL	13	3.3 %
Mutual of Omaha	2	0.5 %
N/A	7	1.8 %
No Secondary Insurance	4	1.0 %
No transport	1	0.3 %
null	12	3.0 %
PeRDUE HEALTHSMART	1	0.3 %
PVS STEEL	1	0.3 %
Red Cross Liability	1	0.3 %
Self Pay	65	16.4 %
Tricare STANDARD	1	0.3 %
UHC Medicare Complete	1	0.3 %
UHC SECURE HORIZONS	1	0.3 %
United Healtcare	1	0.3 %
United Healthcare	4	1.0 %
United Healthcare Choice	5	1.3 %
United Healthcare MIDWEST	1	0.3 %
United Healthcare Salt Lake	1	0.3 %
Unknown	1	0.3 %
Va HEALTH INS	1	0.3 %
VaMD CTR NONVA CARE 04FJB	1	0.3 %
VaMD CTR NONVACARE 04FJB	1	0.3 %
Wellcare	1	0.3 %
Wellcare Medicare HMO	4	1.0 %
Worker's Compensation	2	0.5 %

Dispatch Complaint Assignments Analysis

418

Abdominal Pain	11	2.6 %
Allergies/Hives/Med reaction	2	0.5 %
Anaphylactic Reaction	2	0.5 %
Assault	2	0.5 %
Assist invalid	11	2.6 %
Back pain (non traumatic)	6	1.4 %
Breathing problems	36	8.6 %
Burn/Explosions	1	0.2 %
Cardiac/Respiratory arrest	3	0.7 %
Chest pain	35	8.4 %
Choking	1	0.2 %
Convulsions/Seizure	13	3.1 %

Diabetic problems	8	1.9 %
Falls/Back injury (traumatic)	41	9.8 %
Headache	1	0.2 %
Heart Problems	4	1.0 %
Heat/Cold exposure	1	0.2 %
Hemorrhage/Laceration	1	0.2 %
Nature unknown	21	5.0 %
Overdose/Ingestion/Poisoning	8	1.9 %
Pregnancy/Childbirth/Miscarriage	1	0.2 %
Psych/Suicide	15	3.6 %
Sick case	63	15.1 %
Stroke(CVA)	8	1.9 %
Traffic accident	25	6.0 %
Transfer/Interfacility/Palliative Care	36	8.6 %
Traumatic injuries	16	3.8 %
Unconscious/Fainting	19	4.5 %
Unknown Problem Man Down	27	6.5 %

Total Number Of Patients

396

Patient Age Analysis

18-35	58	14.6 %
36-65	167	42.2 %
65+	154	38.9 %
Less Than 18	17	4.3 %

Patient Gender Analysis

Female	217	54.8 %
Male	179	45.2 %

Patient Ethnic Analysis

Asian	2	0.5 %
Black	42	10.6 %
Hispanic	5	1.3 %
Other	6	1.5 %
Unknown	4	1.0 %
White	337	85.1 %

Patient Pre Existing Conditions Analysis

834

	1	0.1 %
copd	1	0.1 %
A-Fib	15	1.8 %
AAA	1	0.1 %
Acid Reflux / GERD	1	0.1 %
ADD	1	0.1 %
Addiction	2	0.2 %
AFIB	2	0.2 %
Alcoholism	9	1.1 %
Allergies	1	0.1 %
Alzheimers disease	2	0.2 %
Anemia, pernicious	1	0.1 %
Anxiety	26	3.1 %
Arthritis, osteo	9	1.1 %
Arthritis, rheumatoid	1	0.1 %
Asthma	20	2.4 %
Back pain	8	1.0 %
Behavioral / Psych	3	0.4 %
Bells palsy	1	0.1 %
Bi-polar	7	0.8 %
Blood clot	6	0.7 %
Blood Disorder	1	0.1 %
Bowel Obstruction	1	0.1 %
BRAIN JURY	2	0.2 %

Brain Lesions	1	0.1 %
BRONCHITIS	2	0.2 %
BYPASS	3	0.4 %
CAD	1	0.1 %
Cancer	11	1.3 %
Cardiac	61	7.3 %
Cardiac ARREST	1	0.1 %
Cardiac stents	1	0.1 %
Cellulitis	3	0.4 %
CELLULITUS	1	0.1 %
CHF	22	2.6 %
Chronic back pain	1	0.1 %
Chronic pain	1	0.1 %
COPD	39	4.7 %
CVA	22	2.6 %
Deaf	6	0.7 %
Deep vein thrombosis	1	0.1 %
Defibrillator	3	0.4 %
Delerium	1	0.1 %
Dementia	14	1.7 %
Depression	25	3.0 %
Diabetes	2	0.2 %
Diabetes type 1	28	3.4 %
Diabetes type 2	51	6.1 %
Dialysis / Renal Failure	1	0.1 %
Digenerative disk disease	1	0.1 %
Diverticulitis	1	0.1 %
Drug abuse	11	1.3 %
DVT	2	0.2 %
Dyslipidemia	1	0.1 %
Ectopic pregnancy	1	0.1 %
Emphysema	7	0.8 %
Fibromyalgia	2	0.2 %
Gall stones	1	0.1 %
GERD	4	0.5 %
GI PROBLEMS	1	0.1 %
Head injury Brain Injury	1	0.1 %
Hepatitis C	3	0.4 %
Hernia	1	0.1 %
High Cholesterol	7	0.8 %
HIV	2	0.2 %
HTN	49	5.9 %
Hypercholesterolemia	6	0.7 %
Hyperlipidemia	3	0.4 %
Hypertension	71	8.5 %
Hyperthyroidism	1	0.1 %
Hypetention	1	0.1 %
Hypoglycemia	1	0.1 %
Hypotension	1	0.1 %
Hypothyroidism	8	1.0 %
IV DRUG ABUSE	1	0.1 %
IV DRUG USE	1	0.1 %
Kidney disease	1	0.1 %
Kidney failure	1	0.1 %
Kidney Stones	1	0.1 %
Liver disease	3	0.4 %
Lung cancer	1	0.1 %
Lymphedema	2	0.2 %
Lymphoma	1	0.1 %
Macular Degeneration	1	0.1 %
Mental Retardation	1	0.1 %
MI	12	1.4 %
MI x1	1	0.1 %
Migraines	4	0.5 %
Mitral valve prolapse	1	0.1 %
Mitral valve repair	1	0.1 %

MOOD DISORDER	1	0.1 %
MRSA	2	0.2 %
MS	2	0.2 %
Nerve damage	1	0.1 %
Neuropathy	7	0.8 %
NIDDM	1	0.1 %
NONE	32	3.8 %
Osteoarthritis	2	0.2 %
Osteopenia	2	0.2 %
Osteoporosis	1	0.1 %
Others unknown	1	0.1 %
Pacemaker	17	2.0 %
Pacemaker/DEFIBRILLATOR	1	0.1 %
Pancreatitis	2	0.2 %
Parkinsons	3	0.4 %
PCOS	1	0.1 %
Pneumonia	3	0.4 %
Pre Dementia	1	0.1 %
Prediabetes	1	0.1 %
Pregnancy	3	0.4 %
Prostate cancer	1	0.1 %
Psychiatric	2	0.2 %
PTSD	2	0.2 %
Pulmonary Emboli	2	0.2 %
R foot wound	1	0.1 %
R large toe amputation	1	0.1 %
Recent small intestine sugery	1	0.1 %
Recent Vascular surgery	1	0.1 %
Renal Failure	14	1.7 %
Right leg bka	1	0.1 %
Schizophrenia	8	1.0 %
Scoliosis	1	0.1 %
Seizures	21	2.5 %
Self mutilation	1	0.1 %
Sleep apnea	5	0.6 %
SPINAL SURGERY	1	0.1 %
Stage 4 bladder cancer	1	0.1 %
Stage 4 Metastatic Cancer	1	0.1 %
Stent	1	0.1 %
Stents	2	0.2 %
Stroke	6	0.7 %
Strokes	1	0.1 %
SVT	3	0.4 %
Thyroid	3	0.4 %
TIA	6	0.7 %
Transient Ischemic Attack	3	0.4 %
Traumatic brain injury	1	0.1 %
Ulcer	3	0.4 %
Unknown	9	1.1 %
UTI	2	0.2 %
Vertigo	1	0.1 %

Patient Primary Illness Assessment Analysis

267

Abdominal pain/problems	15	5.6 %
Allergic Reaction	1	0.4 %
Altered level of consciousness	13	4.9 %
Behavioral/psychiatric disorder	12	4.5 %
Cardiac arrest	6	2.2 %
Cardiac rhythm disturbance	4	1.5 %
Chest pain/discomfort	20	7.5 %
Diabetic symptoms	10	3.7 %
Hyperthermia	5	1.9 %
Hypovolemia/shock	2	0.7 %
Inhalation injury (toxic gas)	1	0.4 %
Poisoning/drug ingestion	9	3.4 %
Pregnancy/OB delivery	1	0.4 %

Respiratory Arrest	1	0.4 %
Respiratory Distress	23	8.6 %
Seizure	6	2.2 %
Stroke/CVA	5	1.9 %
Syncope/fainting	7	2.6 %
Other	126	47.2 %

Patient Primary Trauma Cause Assessment Analysis

62

Bike Related	1	1.6 %
Blunt/Thrown Object	4	6.5 %
Falls	29	46.8 %
Firearm Assault	1	1.6 %
Motor Vehicle Crash	10	16.1 %
Motorcycle Accident	1	1.6 %
MV - Non-Traffic	2	3.2 %
Non-Motorized Vehicle Accident	1	1.6 %
Other	6	9.7 %
Pedestrian vs MV	1	1.6 %
Stabbing/Cutting Accidental	3	4.8 %
Unknown	3	4.8 %

Procedures Administered Analysis

2060

12 Lead ECG-Transmitted	1	0.0 %
Airway position - head-tilt chin-lift	2	0.1 %
Airway-CPAP	4	0.2 %
Airway-King LT Blind Insertion Airway Device	1	0.0 %
Airway-Nebulizer Treatment	2	0.1 %
Assessment-Adult	375	18.2 %
Assessment-Pediatric	10	0.5 %
Bandage - compression	1	0.0 %
Bandage - pressure	1	0.0 %
Bandage - sterile	8	0.4 %
Blood glucose analysis	430	20.9 %
Capnography (CO2 indicator)	14	0.7 %
Capnography (ETCO2 Monitor)	15	0.7 %
Cervical collar application	20	1.0 %
Cold pack application	7	0.3 %
CPR	25	1.2 %
CPR-Stop	2	0.1 %
Defibrillation - direct	1	0.0 %
ECG - 12 lead	133	6.5 %
ECG - 4 lead	161	7.8 %
Endotracheal intubation	4	0.2 %
Intraosseous insertion	5	0.2 %
Intravenous established	188	9.1 %
Intravenous maintained	7	0.3 %
Intravenous Unsuccessful I	40	1.9 %
Irrigation with clean water	1	0.0 %
Irrigation with normal saline	1	0.0 %
LUCAS Chest Compression SystemI	1	0.0 %
Moved by long spine board	6	0.3 %
Moved by manual lift/carry	47	2.3 %
Moved by rapid extrication	2	0.1 %
Moved by stairchair	35	1.7 %
Nasopharyngeal airway insertion	1	0.0 %
Oropharyngeal airway insertion	1	0.0 %
Orthostatic Blood Pressure Measurement	1	0.0 %
Pain Measurement	11	0.5 %
Patient Loaded	72	3.5 %
Patient Loaded-Helicopter Hot-Load	1	0.0 %
Patient Monitoring of Pre-existing Devices, Equipm	1	0.0 %
Patient Off-Loaded	26	1.3 %
Position Pt - modified trendelenberg	2	0.1 %
Position Pt - semi-fowlers	2	0.1 %
Pulse Oximetry	74	3.6 %
Sling	1	0.0 %

Splint - extremity	2	0.1 %
Splinting-Basic	1	0.0 %
Suction - endotracheal	1	0.0 %
Suction - upper airway	4	0.2 %
Temperature Measurement (Tympanic)	30	1.5 %
Tourniquet	2	0.1 %
Transcutaneous pacing	1	0.0 %
Transported on stretcher secured with belts	253	12.3 %
Transported secured in personal child seat	2	0.1 %
Transported w/belt on captain chair	3	0.1 %
Vagal Maneuver-Valsalva or Other Vagal Maneuver (N	2	0.1 %
Ventilation assist - BVM	8	0.4 %
Wound Care-General	6	0.3 %
Wound Care-Irrigation	2	0.1 %

Medications Administered Analysis

260

Adenosine (adenocard)	1	0.4 %
Albuterol	13	5.0 %
Aspirin	26	10.0 %
Atropine sulfate	1	0.4 %
Dexamethasone sodium phosphate (Decadron)	5	1.9 %
Dextrose 10%	6	2.3 %
Epinephrine HCL (1:10,000)	13	5.0 %
Glucagon	1	0.4 %
Insta Glucose	2	0.8 %
Intravenous electrolyte solutions Dextrose	5	1.9 %
Intravenous electrolyte solutions Lactated Ringer	4	1.5 %
Intravenous electrolyte solutions Sodium chloride	41	15.8 %
Labetalol	1	0.4 %
Lidocain	2	0.8 %
Magnesium sulfate	4	1.5 %
Naloxone HCL	7	2.7 %
Nitroglycerin ointment	1	0.4 %
Nitroglycerin spray	30	11.5 %
Nitroglycerin sublingual tablets	1	0.4 %
Ondansetron (zofran)	8	3.1 %
Oxygen	88	33.8 %

EMS Assignments Summary

EMS Assignments: 418

Mutual Aid Provided: 2 0.48 %

Mutual Aid Received: 0 0.00%

No Patient At Scene: 24 5.74 %

Patient Care Reports: 396

Illness Related: 267 67.42 %

Trauma Related: 62 15.66 %

Granite City Fire Department

2300 Madison Ave., Granite City, IL. 62040

Administered Meds Count

From: 07/01/2017 To: 07/31/2017

Mutual Aid Assignments Provided	2
Abbott Ambulance	1
Long Lake FPD	1

Mutual Aid Assignments Received	0
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Total EMS Assignments Provided		418
4440-02	12	2.9 %
4443-01	218	52.2 %
4447-03	186	44.5 %
4449-04	2	0.5 %

No Patient At Scene Assignments	24
--	-----------

Call Volume Day of Week Analysis		418
Monday	83	19.9 %
Tuesday	56	13.4 %
Wednesday	51	12.2 %
Thursday	61	14.6 %
Friday	55	13.2 %
Saturday	58	13.9 %
Sunday	54	12.9 %

Call Volume by Hour Analysis		418
0	13	3.1 %
1	8	1.9 %
2	10	2.4 %
3	6	1.4 %
4	7	1.7 %
5	12	2.9 %
6	17	4.1 %
7	14	3.3 %
8	13	3.1 %
9	20	4.8 %
10	22	5.3 %
11	27	6.5 %
12	23	5.5 %
13	14	3.3 %
14	27	6.5 %
15	28	6.7 %
16	27	6.5 %
17	28	6.7 %
18	19	4.5 %
19	22	5.3 %
20	15	3.6 %
21	21	5.0 %
22	12	2.9 %
23	13	3.1 %

Miles to Scene Analysis	0
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Miles to Destination Analysis		304
.1 - 5	238	78.3 %
05 - 10	7	2.3 %
10 - 15	51	16.8 %
15 - 20	6	2.0 %
20 - 25	2	0.7 %

Miles to Base Analysis	0
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Destination Analysis

390

*No Transport	86	21.7 %
*Residence	7	1.8 %
Anderson Hospital Maryville	12	3.0 %
*Gateway Regional Medical Center	234	59.1 %
Touchette Regional Hospital, Inc. Centreville	1	0.3 %
St. Elizabeth's Hospital	1	0.3 %
Christian Hospital Northeast	2	0.5 %
John Cochran VA- St. Louis	2	0.5 %
VA Med Center Jefferson Barracks	1	0.3 %
St. Louis University Hospital - Main	13	3.3 %
SSM Cardinal Glennon Children's Hospital	5	1.3 %
St. Louis Children's Hospital	1	0.3 %
Barnes-Jewish Hospital - South	21	5.3 %
St. Mary's Hospital	1	0.3 %
*Granite Nursing & Rehab	4	1.0 %
The Fountains	4	1.0 %
Fountainview Memory Center	1	0.3 %

Destination Analysis (Trauma)

63

*No Transport	14	22.2 %
Anderson Hospital Maryville	3	4.8 %
*Gateway Regional Medical Center	32	50.8 %
St. Louis University Hospital - Main	5	7.9 %
SSM Cardinal Glennon Children's Hospital	2	3.2 %
Barnes-Jewish Hospital - South	7	11.1 %

Destination Determination Analysis

396

Closest Facility (None Below)	145	36.6 %
Not Applicable	84	21.2 %
Patient / Family Choice	133	33.6 %
Patient physician choice	25	6.3 %
Law Enforcement Choice	3	0.8 %
Medical Control	2	0.5 %
Other	4	1.0 %

Insurance Providers Analysis

396

COVENTRY HEALTH PLAN OF MO	1	0.3 %
AARP Medicare Complete	1	0.3 %
AARP uhc	1	0.3 %
Advantra coventry	2	0.5 %
Advantra GHP	2	0.5 %
Advantra Gold Advantage	2	0.5 %
Advantra Medicare HMO	1	0.3 %
Aetna	3	0.8 %
Aetna Life and Casualty Other	2	0.5 %
Anthem Blue Cross	2	0.5 %
BCBS	3	0.8 %
BCBS IL	3	0.8 %
BCBS KS	1	0.3 %
BCBS PENNSYLVANIA	1	0.3 %
BCBS TENNESSEE	1	0.3 %
Blue Choice HMO	1	0.3 %
Blue Cross MO	1	0.3 %
Cigna	1	0.3 %
Cigna Other	1	0.3 %
EHA4health	1	0.3 %
ESSENCE	1	0.3 %
ESSENCE HEALTHCARE	1	0.3 %
GEHA4HEALTH	1	0.3 %
GHP	1	0.3 %
Harmony	2	0.5 %
Harmony Health Plan	11	2.8 %
Harmony health plan il	1	0.3 %
Harmony healthplan	2	0.5 %
Healthlink	1	0.3 %

Chronic problems	5	1.3 %
Falls/Back injury (traumatic)	41	9.8 %
Headache	1	0.2 %
Heart Problems	4	1.0 %
Heat/Cold exposure	1	0.2 %
Hemorrhage/Laceration	1	0.2 %
Nature unknown	21	5.0 %
Overdose/Ingestion/Poisoning	8	1.9 %
Pregnancy/Childbirth/Miscarriage	1	0.2 %
Psych/Suicide	15	3.6 %
Sick case	63	15.1 %
Stroke(CVA)	8	1.9 %
Traffic accident	25	6.0 %
Transfer/Interfacility/Palliative Care	36	8.6 %
Traumatic injuries	16	3.8 %
Unconscious/Fainting	19	4.5 %
Unknown Problem Man Down	27	6.5 %

Total Number Of Patients

396

Patient Age Analysis

18-35	58	14.6 %
36-65	167	42.2 %
65+	154	38.9 %
Less Than 18	17	4.3 %

Patient Gender Analysis

Female	217	54.8 %
Male	179	45.2 %

Patient Ethnic Analysis

Asian	2	0.5 %
Black	42	10.6 %
Hispanic	5	1.3 %
Other	6	1.5 %
Unknown	4	1.0 %
White	337	85.1 %

Patient Pre Existing Conditions Analysis

834

	1	0.1 %
copd	1	0.1 %
A-Fib	15	1.8 %
AAA	1	0.1 %
Acid Reflux / GERD	1	0.1 %
ADD	1	0.1 %
Addiction	2	0.2 %
AFIB	2	0.2 %
Alcoholism	9	1.1 %
Allergies	1	0.1 %
Alzheimers disease	2	0.2 %
Anemia, pernicious	1	0.1 %
Anxiety	26	3.1 %
Arthritis, osteo	9	1.1 %
Arthritis, rheumatoid	1	0.1 %
Asthma	20	2.4 %
Back pain	8	1.0 %
Behavioral / Psych	3	0.4 %
Bells palsy	1	0.1 %
Bi-polar	7	0.8 %
Blood clot	6	0.7 %
Blood Disorder	1	0.1 %
Bowel Obstruction	1	0.1 %
BRAIN JURY	2	0.2 %

MRSA	2	0.1 %
MS	2	0.2 %
Nerve damage	1	0.1 %
Neuropathy	7	0.8 %
NIDDM	1	0.1 %
NONE	32	3.8 %
Osteoarthritis	2	0.2 %
Osteopenia	2	0.2 %
Osteoporosis	1	0.1 %
Others unknown	1	0.1 %
Pacemaker	17	2.0 %
Pacemaker/DEFIBRILLATOR	1	0.1 %
Pancreatitis	2	0.2 %
Parkinsons	3	0.4 %
PCOS	1	0.1 %
Pneumonia	3	0.4 %
Pre Dementia	1	0.1 %
Prediabetes	1	0.1 %
Pregnancy	3	0.4 %
Prostate cancer	1	0.1 %
Psychiatric	2	0.2 %
PTSD	2	0.2 %
Pulmonary Emboli	2	0.2 %
R foot wound	1	0.1 %
R large toe amputation	1	0.1 %
Recent small intestine sugery	1	0.1 %
Recent Vascular surgery	1	0.1 %
Renal Failure	14	1.7 %
Right leg bka	1	0.1 %
Schizophrenia	8	1.0 %
Scoliosis	1	0.1 %
Seizures	21	2.5 %
Self mutilation	1	0.1 %
Sleep apnea	5	0.6 %
SPINAL SURGERY	1	0.1 %
Stage 4 bladder cancer	1	0.1 %
Stage 4 Metastatic Cancer	1	0.1 %
Stent	1	0.1 %
Stents	2	0.2 %
Stroke	6	0.7 %
Strokes	1	0.1 %
SVT	3	0.4 %
Thyroid	3	0.4 %
TIA	6	0.7 %
Transient Ischemic Attack	3	0.4 %
Traumatic brain injury	1	0.1 %
Ulcer	3	0.4 %
Unknown	9	1.1 %
UTI	2	0.2 %
Vertigo	1	0.1 %

Patient Primary Illness Assessment Analysis

267

Abdominal pain/problems	15	5.6 %
Allergic Reaction	1	0.4 %
Altered level of consciousness	13	4.9 %
Behavioral/psychiatric disorder	12	4.5 %
Cardiac arrest	6	2.2 %
Cardiac rhythm disturbance	4	1.5 %
Chest pain/discomfort	20	7.5 %
Diabetic symptoms	10	3.7 %
Hyperthermia	5	1.9 %
Hypovolemia/shock	2	0.7 %
Inhalation injury (toxic gas)	1	0.4 %
Poisoning/drug ingestion	9	3.4 %
Pregnancy/OB delivery	1	0.4 %

Splinting-Basic	1	0.0 %
Suction - endotracheal	1	0.0 %
Suction - upper airway	4	0.2 %
Temperature Measurement (Tympanic)	30	1.5 %
Tourniquet	2	0.1 %
Transcutaneous pacing	1	0.0 %
Transported on stretcher secured with belts	253	12.3 %
Transported secured in personal child seat	2	0.1 %
Transported w/belt on captain chair	3	0.1 %
Vagal Maneuver-Valsalva or Other Vagal Maneuver (N	2	0.1 %
Ventilation assist - BVM	8	0.4 %
Wound Care-General	6	0.3 %
Wound Care-Irrigation	2	0.1 %

Medications Administered Analysis

260

Adenosine (adenocard)	1	0.4 %
Albuterol	13	5.0 %
Aspirin	26	10.0 %
Atropine sulfate	1	0.4 %
Dexamethasone sodium phosphate (Decadron)	5	1.9 %
Dextrose 10%	6	2.3 %
Epinephrine HCL (1:10,000)	13	5.0 %
Glucagon	1	0.4 %
Insta Glucose	2	0.8 %
Intravenous electrolyte solutions Dextrose	5	1.9 %
Intravenous electrolyte solutions Lactated Ringer	4	1.5 %
Intravenous electrolyte solutions Sodium chloride	41	15.8 %
Labetalol	1	0.4 %
Lidocain	2	0.8 %
Magnesium sulfate	4	1.5 %
Naloxone HCL	7	2.7 %
Nitroglycerin ointment	1	0.4 %
Nitroglycerin spray	30	11.5 %
Nitroglycerin sublingual tablets	1	0.4 %
Ondansetron (zofran)	8	3.1 %
Oxygen	88	33.8 %

EMS Assignments Summary

EMS Assignments:

418

Mutual Aid Provided:	2	0.48 %
Mutual Aid Received:	0	0.00%
No Patient At Scene:	24	5.74 %

Patient Care Reports:

396

Illness Related:	267	67.42 %
Trauma Related:	62	15.66 %

Granite City Fire Department

Departmental Activity Report

Current Period: 07/01/2017 to 07/31/2017, Prior Period: 07/01/2017 to 07/31/2017

00:00 to 24:00

All Stations

All Shifts

All Units

Fire Alarm Responses, Training Classes, Occupancy Inspections and Activities

Category	Current Period		Prior Period	
	Count	Staff Hrs	Count	Staff Hrs
Fire Alarm Situations				
Dispatched and cancelled en route	13	108:34	13	108:34
Electrical wiring/equipment problem	6	94:54	6	94:54
Emergency medical service (EMS) Incident	4	00:39	4	00:39
Excessive heat, scorch burns with no	1	01:06	1	01:06
False alarm and false call, Other	16	22:04	16	22:04
Fire, Other	1	09:57	1	09:57
Good intent call, Other	4	02:53	4	02:53
Hazardous condition, Other	4	32:17	4	32:17
Medical assist	112	181:24	112	181:24
Mobile property (vehicle) fire	2	03:30	2	03:30
Outside rubbish fire	4	01:51	4	01:51
Person in distress	1	00:36	1	00:36
Public service assistance	2	00:46	2	00:46
Rescue or EMS standby	1	06:36	1	06:36
Rescue, emergency medical call (EMS),	5	46:40	5	46:40
Service call, Other	2	02:50	2	02:50
Smoke, odor problem	1	03:00	1	03:00
Special type of incident, other	1	03:12	1	03:12
Structure Fire	9	249:25	9	249:25
System or detector malfunction	5	09:45	5	09:45
Unauthorized burning	2	01:18	2	01:18
Unintentional system/detector operation	4	06:27	4	06:27
Wrong location, no emergency found	1	00:24	1	00:24
	201	790:18	201	790:18

Inspection Violations Corrected

ILLUMINATION EMERGENCY LIGHTS	1		1	
	1		1	

Inspection Violations Discovered

ACCESSIBLE STOCK ROOM	1		1	
COMMERCIAL HOOD SYSTEM SERVICE	1		1	
ELECTRICAL BREAKERS:	2		2	
EXIT SIGN ILLUMINATION	6		6	
FD CONNECTIONS LABELED AND OPERATIONAL	1		1	

* Staff hours for Fire Alarm responses that have an associated EMS alarm record are considered shared hours. Shared hours are posted only with the EMS alarm responses to avoid duplication of staff hours in totals.

Granite City Fire Department

Departmental Activity Report

Current Period: 07/01/2017 to 07/31/2017, Prior Period: 07/01/2017 to 07/31/2017

00:00 to 24:00

All Stations

All Shifts

All Units

Fire Alarm Responses, Training Classes, Occupancy Inspections and Activities

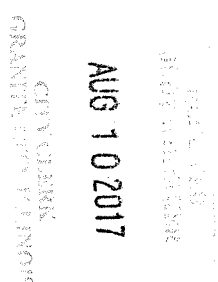
Category	Current Period		Prior Period	
	Count	Staff Hrs	Count	Staff Hrs
Inspection Violations Discovered				
GENERAL REQUIREMENTS - FIRE EXTINGUISHERS	7		7	
ILLUMINATION EMERGENCY LIGHTS	10		10	
INTEGRITY OF CEILINGS MAINTAINED	1		1	
SPRINKLER SYSTEM OPERATIONAL & SERVICED	2		2	
UNAPPROVED: COVERS, JUNCTION BOXES, OPEN	2		2	
	<u>33</u>		<u>33</u>	
Occupancy Inspections/Activities				
INSPECTION - Building	1	00:00	1	00:00
INSPECTION - Fire Protection	4	00:00	4	00:00
INSPECTION - General	82	00:00	82	00:00
RE-INSPECTION	2	00:00	2	00:00
	<u>89</u>	<u>00:00</u>	<u>89</u>	<u>00:00</u>
Training				
AERIAL TRAINING	6	12:00	6	12:00
APPARATUS TRAINING	5	07:30	5	07:30
balder generator	5	05:00	5	05:00
COMPUTER F.D. REPORT TRAINING	4	06:00	4	06:00
EMS PROTOCOL & TEXT	7	02:15	7	02:15
Fire Ground Rehab	6	06:00	6	06:00
Fire Inspections	10	182:00	10	182:00
Fire Officer I	4	36:00	4	36:00
Forcible Entry	2	01:00	2	01:00
General Building Construction	7	00:00	7	00:00
Hazardous Material - Operations	2	06:00	2	06:00
Hazmat Awareness and Operations	1	03:00	1	03:00
HIGH RISE PACK	4	06:00	4	06:00
LADDERS	4	04:00	4	04:00
PHYSICAL TRAINING	12	11:25	12	11:25
safety	5	05:00	5	05:00
STREETS	1	00:40	1	00:40
	<u>85</u>	<u>293:50</u>	<u>85</u>	<u>293:50</u>

* Staff hours for Fire Alarm responses that have an associated EMS alarm record are considered shared hours. Shared hours are posted only with the EMS alarm responses to avoid duplication of staff hours in totals.



*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL. 62040
Worker's Compensation Report
8/1/2017*

Page 1



Fire Department

10 Claims

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Lifting Fan	Back			
Hit ceiling of cab on truck	Neck , Back			
Working condition contributed	Cardiac Condition			
Stepped in ditch during fire	Foot			
Pulling on hose	Right elbow			
Alleges repetitive trauma	Bilateral Hands			
Fell holding charged hose	Both shoulders			
Assisting with house fire	Back			
Working conditions contributed	PTSD			
Fire Department Totals		\$ 356,760.66	\$ 820,849.39	\$ 1,177,610.05



*Office of Risk Management
Lynnette Kozar, Risk Manager
City of Granite City, IL 62040
Worker's Compensation Report
8/1/2017*

Police Department

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Dog bite	Rt. Forearm and palm			
Auto Accident	Arm, Neck			
Arresting suspect, struck by chair	Back			
Crawling through a window	Neck, Shoulder			
Subduing suspect	Back			
Scaling a fence	Wrist, Right			
Subduing suspect	Neck			
Subduing suspect	Neck			
Police Department Totals		\$ 765,899.48	\$ 988,969.52	\$ 1,754,869.00



*Office of Risk Management
Lynnette Kozer, Risk Manager
City of Granite City, IL. 62040
Worker's Compensation Report
8/1/2017*

Public Works

7 Claims

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Stepped on manhole, flipped	Knees			
Push shovel in basin	Low Back			
Alleges opening gate	Low Back			
Shoveling asphalt	Neck			
Pulling Board	Upper back			
Charged line	Lt Calf and leg			
Stepping on ladder	Rt Leg			
Public Works Totals		\$ 304,914.72	\$ 475,108.28	\$ 780,023.00

Waste Water Treatment

4 Claims

Alleged Description	Alleged Body Part	Paid	Reserved	Total
Slipped on Truck runner	Shoulder			
Opening valve	Back			
Tripped over pipe	Arm, Back			
Working under sink	Neck			
WWTP Totals		\$ 487,727.22	\$ 303,768.78	\$ 791,496.00

	Paid	Reserved	Total
Worker's Compensation Totals All Departments	\$ 1,915,302.08	\$ 2,588,695.97	\$ 4,503,998.05



*Office of Risk Management
Lynnette Kozar, Risk Manager
City of Granite City, IL. 62040
Liability, Property and Auto Report
8/1/2017*

Liability, Property, Auto

20 Claims

Alleged Description	Complaint	Paid	Reserved	Total
Alleges Retaliation	Liability			
Trip and Fall	Liability			
Alleges information released	Civil			
Fell on manhole cover	Liability			
Class Action Tow Fee Dispute	Constitution Rights			
Alleges inadequate lighting / walkway	Liability			
Stepped in Hole	Liability			
Manhole Cover hit vehicle	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Back up	Liability			
Sewer Break	Liability			
Sewer Break	Liability			
Ambulance backed into parked car	Liability			
Sewer Back up	Liability			
Civil Rights - 4th and 14th Amendmer	Liability			
Total All Liability, Property and Auto		\$ 120,180.43	\$ 276,494.42	\$ 396,674.95



*Office of Risk Management
Lynnette Kozar, Risk Manager
City of Granite City, IL. 62040
8/1/2017*

Summary all Open Files

Total Open Claims 49

	Paid	Reserve	Total
Fire Totals	356,760.66	820,849.39	1,177,610.05
Police Totals	765,899.48	988,969.52	1,754,869.00
Public Works Totals	304,914.72	475,108.28	780,023.00
WWTP Totals	487,727.22	303,768.78	791,496.00
Liability Totals	120,180.43	276,494.42	396,674.95
All Open Files Totals	\$2,035,482.51	\$ 2,865,190.39	\$ 4,900,673.00

RESOLUTION FOR SPECIAL EARLY REDEMPTION
CALL OF REVENUE BONDS ISSUED
UNDER SERIES 2012 (CITY OF GRANITE CITY PROJECT)

WHEREAS, the City of Granite City, under agreement with Southwestern Illinois Development Authority, issued Revenue Bonds known as the Series 2012 (Granite City Project), which provides for optional redemption call by the City, and

WHEREAS, UMB BANK., as "Depositor", has notified the City and Southwestern Illinois Development Authority that additional tax increments have been received beyond interest payment requirements for September 1, 2017, which receipts would qualify under the bond definitions and sinking fund reserve account requirements to be available for special mandatory redemption in future, and which if used for redemption on the September 1, 2017 call will save considerable bond interest charges, and

WHEREAS, the City Council elects to provide for such savings by authorizing such use of said additional tax increments at this time,

NOW THEREFORE, IT IS HEREBY RESOLVED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY AS FOLLOWS;

SECTION ONE: The City Council hereby concurs with the Issuer, Southwestern Illinois Development Authority, the Depositor and the Holders of all outstanding bond, for a special September 1, 2017 notice of call for early redemption of \$300,000 bonds as of September 1, 2017.

SECTION TWO: The provisions of this Resolution shall be effective upon waiver of call procedure, and waiver of time restriction pertaining to special optional redemptions, and all other requirements in the bond indenture, and in a form acceptable to the Bond Trustee from all outstanding bond holders.

ADOPTED BY THE CITY COUNCIL OF THE CITY OF GRANITE CITY ON THIS 15TH DAY OF AUGUST, 2017.

APPROVED BY THE MAYOR OF THE CITY OF GRANITE CITY ON THIS 15TH DAY OF AUGUST, 2017.

ATTEST:

MAYOR

CLERK

88719

OBLIGOR NOTICE OF REDEMPTION

To: UMB Bank, N.A.
2 South Broadway, Suite 600
St. Louis, Missouri 63102
Attention: Corporate Trust Department

Re: \$9,820,000 SOUTHWESTERN ILLINOIS DEVELOPMENT AUTHORITY LOCAL
GOVERNMENT PROGRAM REVENUE REFUNDING BONDS, SERIES 2012 (CITY
OF GRANITE CITY PROJECT)

Governing Documents:

Bond Order adopted August 16, 2012 by Southwestern Illinois Development Authority (the "Issuer")
Ordinance Adopted October 18, 2012 by City of Granite City, Illinois
Depository Agreement dated as of October 1, 2012 by and between the Issuer and UMB Bank, N.A., as
Depositor (the "Depositor")

The Southwestern Illinois Development Authority (the "Issuer") and the City of Granite City, Illinois (the "City") gives notice to and irrevocably requests and directs UMB Bank, N.A., as Depositor for the above-referenced bonds (the "Bonds") as requested to and consented to by the beneficial owners of all of the outstanding Bonds (the "Holders"), to provide an optional redemption of the Bonds on **September 1, 2017, an Interest Payment Date**, for \$300,000 principal at par plus accrued interest to the redemption Date.

By signature consent below of the Holders, the holders hereby waive the following provisions in order to perfect this optional redemption for the referenced date above and not for any other call date:

- (a) As required under the Bond Order of the City, "The Bonds shall be subject to redemption prior to their maturity at the option of the Issuer as a whole, or in part on any date on or after March 1, 2019, at a redemption price of 100% of the principal amount thereof being redeemed, plus accrued interest to the date fixed for redemption."
- (b) As required under Section 4 of the Bond Ordinance of the City, "Unless otherwise specified in the Bond Order, the Bonds are subject to mandatory redemption prior to maturity in part in such order of maturity and mandatory sinking fund installments, if any, as shall be selected by the City (less than all of the Bonds of a single maturity to be selected by the Depositor as hereinafter provided) on March 1 of each year" and
- (c) As required under Section 8 of the Bond Resolution, "unless otherwise provided in the Bond Order, the Bonds shall be subject to mandatory sinking fund redemption in part as hereinafter provided, on March 1 (or such other date or dates as shall be set forth in the Bond Order) of the years and in the aggregate principal amounts, as shall be set forth in the Bond Order"
- (d) All other provisions of the Bond Ordinance, the Bond Order, and the Bond Resolution which may be read in Conflict with the above proposed redemption are hereby expressly waived.

Page #2 – Directions for Optional Redemption
Dated: July 31, 2017

By signature consent below of the Depositor, the Depositor hereby waives the City's notice provision under Section 4 of the Bond Ordinance.

These instructions shall constitute a binding irrevocable agreement between the Issuer, the City, the Depositor and the Holders.

**SOUTHWESTERN ILLINOIS
DEVELOPMENT AUTHORITY**

DATED: July __, 2017

By: _____
Title: Michael J. Lundy, Executive Director

CITY OF GRANITE CITY, ILLINOIS

DATED: July __, 2017

By: _____
Title: Scott Oney, Comptroller

**ACKNOWLEDGEMENT AND
AGREEMENT:**

UMB BANK, N.A., as Depositor

DATED: July __, 2017

By: _____
Title: Sandra L. Battas, Vice President

**OPPENHEIMER ROCHESTER SHORT
TERM MUNICIPAL FUND**

DATED: July __, 2017

By: _____
Title: Alan Kreso, Vice President

WADDELL & REED

DATED: July __, 2017

By: _____
Title: Michael Walls, Senior Vice President

DEPARTMENT TOTALS										
DEPARTMENT: 10 -01 MAYOR										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
0 CHECK(S)			0 CHECK(S)		9 CHECK(S)		0 CHECK(S)		9 CHECK(S)	
NBR CHECKS										
NET	-	0.00		0.00		12069.58		0.00		12069.58
EARNINGS										
GROSS	-	0.00		0.00		17270.16		0.00		17270.16
SALARY	-	0.00	0.00	0.00	508.30	16620.16	0.00	0.00	508.30	16620.16
TIF ADMIN	-	0.00	0.00	0.00	0.00	500.00	0.00	0.00	0.00	500.00
DECLINE	-	0.00	0.00	0.00	0.00	150.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	200.00	0.00	0.00	0.00	200.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	0.00	0.00	3.84	3.81	0.00	0.00	3.84	3.81
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	47.48	0.00	0.00	0.00	47.48
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	24.00	0.00	0.00	0.00	24.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
DIVERS 457%-	0.00	0.00	0.00	0.00	0.00	105.24	0.00	0.00	0.00	105.24
I.M.R.F -	0.00	0.00	0.00	0.00	1513.59	623.17	0.00	0.00	1513.59	623.17
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	16341.75	2070.34	0.00	0.00	16341.75	2070.34
STATE W/H -	0.00	0.00	0.00	0.00	16341.75	795.66	0.00	0.00	16341.75	795.66
FICA -	0.00	0.00	0.00	0.00	17070.16	1058.35	0.00	0.00	17070.16	1058.35
MEDICARE -	0.00	0.00	0.00	0.00	17070.16	247.53	0.00	0.00	17070.16	247.53
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

RECEIVED
 JUDY WHITAKER
 AUG 11 2017
 CITY CLERK
 GRANITE CITY ILLINOIS

D E P A R T M E N T T O T A L S										
DEPARTMENT: 10 -02			CITY CLERK							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		4 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NET -	0.00		0.00		5200.74		0.00		5200.74	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		8064.16		0.00		8064.16
SALARY -	0.00	0.00	0.00	0.00	346.64	7914.16	0.00	0.00	346.64	7914.16
DECLINE -	0.00	0.00	0.00	0.00	0.00	150.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	150.00	0.00	0.00	0.00	150.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	0.00	0.00	5.12	5.08	0.00	0.00	5.12	5.08
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	94.96	0.00	0.00	0.00	94.96
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	881.42	362.89	0.00	0.00	881.42	362.89
VOL ADD CON-	0.00	0.00	0.00	0.00	0.00	104.17	0.00	0.00	0.00	104.17
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	164.58	0.00	0.00	0.00	164.58
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	7386.69	1009.82	0.00	0.00	7386.69	1009.82
STATE W/H -	0.00	0.00	0.00	0.00	7386.69	379.08	0.00	0.00	7386.69	379.08
FICA -	0.00	0.00	0.00	0.00	7749.58	480.47	0.00	0.00	7749.58	480.47
MEDICARE -	0.00	0.00	0.00	0.00	7749.58	112.37	0.00	0.00	7749.58	112.37
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -03 LEGISLATIVE - ALDERM										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		10 CHECK(S)		0 CHECK(S)		10 CHECK(S)	
NET -	0.00		0.00		2052.68		0.00		2052.68	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		2633.30		0.00		2633.30
SALARY -	0.00	0.00	0.00	0.00	45.00	2633.30	0.00	0.00	45.00	2633.30
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
ST FARM INS	0.00	0.00	0.00	0.00	1.28	1.27	0.00	0.00	1.28	1.27
I.M.R.F -	0.00	0.00	0.00	0.00	143.90	59.25	0.00	0.00	143.90	59.25
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	2574.05	189.62	0.00	0.00	2574.05	189.62
STATE W/H -	0.00	0.00	0.00	0.00	2574.05	128.98	0.00	0.00	2574.05	128.98
FICA -	0.00	0.00	0.00	0.00	2633.30	163.30	0.00	0.00	2633.30	163.30
MEDICARE -	0.00	0.00	0.00	0.00	2633.30	38.20	0.00	0.00	2633.30	38.20
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S										
DEPARTMENT: 10 -04 TREASURER										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		4 CHECK(S)		0 CHECK(S)		4 CHECK(S)	
NET -	0.00		0.00		5051.76		0.00		5051.76	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		7928.48		0.00		7928.48
SALARY -	0.00	0.00	0.00	0.00	346.65	7778.48	0.00	0.00	346.65	7778.48
DECLINE -	0.00	0.00	0.00	0.00	0.00	150.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	54.08	0.00	0.00	0.00	54.08
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	17.48	0.00	0.00	0.00	17.48
ST FARM INS-	0.00	0.00	0.00	0.00	2.56	2.54	0.00	0.00	2.56	2.54
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	220.20	0.00	0.00	0.00	220.20
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	94.96	0.00	0.00	0.00	94.96
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00	20.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	866.58	356.78	0.00	0.00	866.58	356.78
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	50.00	0.00	0.00	0.00	50.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	23.72	0.00	0.00	0.00	23.72
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	32.35	0.00	0.00	0.00	32.35
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	7301.50	924.46	0.00	0.00	7301.50	924.46
STATE W/H -	0.00	0.00	0.00	0.00	7301.50	352.46	0.00	0.00	7301.50	352.46
FICA -	0.00	0.00	0.00	0.00	7878.48	488.46	0.00	0.00	7878.48	488.46
MEDICARE -	0.00	0.00	0.00	0.00	7878.48	114.23	0.00	0.00	7878.48	114.23
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -05 FINANCIAL ADMINISTRA										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
0 CHECK(S)			0 CHECK(S)		3 CHECK(S)		0 CHECK(S)		3 CHECK(S)	
NBR CHECKS	-									
NET	-	0.00		0.00		3517.38		0.00		3517.38
EARNINGS		HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	
GROSS	-		0.00		0.00		5083.74		0.00	5083.74
SALARY	-	0.00	0.00	0.00	0.00	216.62	4858.74	0.00	0.00	216.62 4858.74
WC ED	-	0.00	0.00	0.00	0.00	0.00	225.00	0.00	0.00	0.00 225.00
DEDUCTIONS		EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	
OPTUM FUNDI	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	-	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	100.00
HLTH SNG PR-	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	-	0.00	0.00	0.00	0.00	1.28	1.27	0.00	0.00	1.28 1.27
AFSCME 31	-	0.00	0.00	0.00	0.00	0.00	47.48	0.00	0.00	0.00 47.48
UNITED WAY	-	0.00	0.00	0.00	0.00	0.00	5.00	0.00	0.00	0.00 5.00
I.M.R.F	-	0.00	0.00	0.00	0.00	555.65	228.77	0.00	0.00	555.65 228.77
MELLON ADD	-	0.00	0.00	0.00	0.00	0.00	20.00	0.00	0.00	0.00 20.00
REIMBURSE	-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00
TAXES		TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	
FEDERAL W/H-	-	0.00	0.00	0.00	0.00	4734.97	549.73	0.00	0.00	4734.97 549.73
STATE W/H	-	0.00	0.00	0.00	0.00	4734.97	234.38	0.00	0.00	4734.97 234.38
FICA	-	0.00	0.00	0.00	0.00	4963.74	307.76	0.00	0.00	4963.74 307.76
MEDICARE	-	0.00	0.00	0.00	0.00	4963.74	71.97	0.00	0.00	4963.74 71.97
EIC CREDIT	-		0.00		0.00		0.00		0.00	

D E P A R T M E N T T O T A L S										
DEPARTMENT: 10 -06			IT DEPARTMENT							
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		2 CHECK(S)		0 CHECK(S)		2 CHECK(S)	
NET -	0.00		0.00		4014.51		0.00		4014.51	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		6125.00		0.00		6125.00
SALARY -	0.00	0.00	0.00	0.00	173.32	6125.00	0.00	0.00	173.32	6125.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	50.00	0.00	0.00	0.00	50.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	42.31	0.00	0.00	0.00	42.31
I.M.R.F -	0.00	0.00	0.00	0.00	669.47	275.62	0.00	0.00	669.47	275.62
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	72.90	0.00	0.00	0.00	72.90
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	5726.48	902.04	0.00	0.00	5726.48	902.04
STATE W/H -	0.00	0.00	0.00	0.00	5726.48	283.46	0.00	0.00	5726.48	283.46
FICA -	0.00	0.00	0.00	0.00	6002.10	372.13	0.00	0.00	6002.10	372.13
MEDICARE -	0.00	0.00	0.00	0.00	6002.10	87.03	0.00	0.00	6002.10	87.03
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -07 POLICE										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS	0 CHECK(S)		0 CHECK(S)		72 CHECK(S)		0 CHECK(S)		72 CHECK(S)	
NET -	0.00		0.00		138067.77		0.00		138067.77	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		231335.40		0.00		231335.40
SALARY -	0.00	0.00	0.00	0.00	5945.39	191096.46	0.00	0.00	5945.39	191096.46
SHORT/CHG -	0.00	0.00	0.00	0.00	12.00	274.26	0.00	0.00	12.00	274.26
REIM OT -	0.00	0.00	0.00	0.00	45.50	2341.44	0.00	0.00	45.50	2341.44
OVERTIME PA-	0.00	0.00	0.00	0.00	125.50	5662.88	0.00	0.00	125.50	5662.88
COURT TIME -	0.00	0.00	0.00	0.00	5.00	335.58	0.00	0.00	5.00	335.58
CALL OUT -	0.00	0.00	0.00	0.00	12.00	595.28	0.00	0.00	12.00	595.28
C O R -	0.00	0.00	0.00	0.00	94.00	4230.00	0.00	0.00	94.00	4230.00
RANK DIFF -	0.00	0.00	0.00	0.00	320.00	912.89	0.00	0.00	320.00	912.89
DISPATCH 2 -	0.00	0.00	0.00	0.00	344.00	344.00	0.00	0.00	344.00	344.00
SHIF/DIFF3 -	0.00	0.00	0.00	0.00	1147.00	745.55	0.00	0.00	1147.00	745.55
WC ED -	0.00	0.00	0.00	0.00	0.00	175.00	0.00	0.00	0.00	175.00
INJURED -	0.00	0.00	0.00	0.00	0.00	178.72-	0.00	0.00	0.00	178.72-
DECLINE -	0.00	0.00	0.00	0.00	0.00	450.00	0.00	0.00	0.00	450.00
SICK--CASH -	0.00	0.00	0.00	0.00	348.00	15175.24	0.00	0.00	348.00	15175.24
VAC - CASH -	0.00	0.00	0.00	0.00	164.00	7151.55	0.00	0.00	164.00	7151.55
RETRO--REG -	0.00	0.00	0.00	0.00	0.00	112.98	0.00	0.00	0.00	112.98
MILITARY LV-	0.00	0.00	0.00	0.00	0.00	1121.32-	0.00	0.00	0.00	1121.32-
COMP PAY -	0.00	0.00	0.00	0.00	30.00	1962.33	0.00	0.00	30.00	1962.33
TUITION FR -	0.00	0.00	0.00	0.00	0.00	1000.00	0.00	0.00	0.00	1000.00
CELL -	0.00	0.00	0.00	0.00	0.00	70.00	0.00	0.00	0.00	70.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00	0.00	75.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	200.00	0.00	0.00	0.00	200.00
PBPA CHIEF -	0.00	0.00	0.00	0.00	0.00	60.00	0.00	0.00	0.00	60.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	1123.05	0.00	0.00	0.00	1123.05
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	318.77	0.00	0.00	0.00	318.77
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	0.00	0.00	55.04	54.61	0.00	0.00	55.04	54.61
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	23501.00	0.00	0.00	0.00	23501.00
PBPA LABOR -	0.00	0.00	0.00	0.00	0.00	2646.00	0.00	0.00	0.00	2646.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	522.28	0.00	0.00	0.00	522.28
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FRINGE BFTS-	0.00	0.00	0.00	0.00	0.00	1070.00	0.00	0.00	0.00	1070.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	108.33	0.00	0.00	0.00	108.33
POLICE/FIRE-	0.00	0.00	0.00	0.00	0.00	110.19	0.00	0.00	0.00	110.19
CHILD SUPPT-	0.00	0.00	0.00	0.00	0.00	1838.01	0.00	0.00	0.00	1838.01
DIVERS 457%-	0.00	0.00	0.00	0.00	0.00	871.30	0.00	0.00	0.00	871.30
GARN FEE -	0.00	0.00	0.00	0.00	0.00	9.82	0.00	0.00	0.00	9.82
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	45.54	0.00	0.00	0.00	45.54
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	445.18	0.00	0.00	0.00	445.18
PRIN LOAN -	0.00	0.00	0.00	0.00	0.00	57.68	0.00	0.00	0.00	57.68
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	615.00	0.00	0.00	0.00	615.00

I.M.R.F -	0.00	0.00	0.00	0.00	2823.28	1162.39	0.00	0.00	2823.28	1162.39
POL PENSION-	0.00	0.00	0.00	0.00	0.00	16569.31	0.00	0.00	0.00	16569.31
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	72.91	0.00	0.00	0.00	72.91
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	139.20	0.00	0.00	0.00	139.20
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	188335.16	27725.43	0.00	0.00	188335.16	27725.43
STATE W/H -	0.00	0.00	0.00	0.00	188335.16	9245.50	0.00	0.00	188335.16	9245.50
FICA -	0.00	0.00	0.00	0.00	25957.63	1609.35	0.00	0.00	25957.63	1609.35
MEDICARE -	0.00	0.00	0.00	0.00	204950.76	2971.78	0.00	0.00	204950.76	2971.78
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -08 FIRE & AMBULANCE										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	53 CHECK(S)	0 CHECK(S)	53 CHECK(S)				
NET -	0.00	0.00	0.00	106569.14	0.00	106569.14				
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		169016.00		0.00		169016.00
SALARY -	0.00	0.00	0.00	0.00	5737.58	160488.48	0.00	0.00	5737.58	160488.48
CALL OUT -	0.00	0.00	0.00	0.00	113.25	4719.61	0.00	0.00	113.25	4719.61
RANK DIFF -	0.00	0.00	0.00	0.00	1480.00	2857.91	0.00	0.00	1480.00	2857.91
EMA COOR -	0.00	0.00	0.00	0.00	0.00	500.00	0.00	0.00	0.00	500.00
DECLINE -	0.00	0.00	0.00	0.00	0.00	450.00	0.00	0.00	0.00	450.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
UMB FUNDING	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM FUNDI-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	1950.00	0.00	0.00	0.00	1950.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	250.00	0.00	0.00	0.00	250.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	239.42	0.00	0.00	0.00	239.42
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	258.30	0.00	0.00	0.00	258.30
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	14.62	0.00	0.00	0.00	14.62
ST FARM INS-	0.00	0.00	0.00	0.00	43.52	43.18	0.00	0.00	43.52	43.18
IPPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	4651.22	0.00	0.00	0.00	4651.22
RELIEF & WE-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	47.48	0.00	0.00	0.00	47.48
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	362.82	0.00	0.00	0.00	362.82
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
POLICE/FIRE-	0.00	0.00	0.00	0.00	0.00	1016.48	0.00	0.00	0.00	1016.48
RELIEF&WEL2-	0.00	0.00	0.00	0.00	0.00	60.00	0.00	0.00	0.00	60.00
253 FIRE PA-	0.00	0.00	0.00	0.00	0.00	196.00	0.00	0.00	0.00	196.00
ADD FIRE PA-	0.00	0.00	0.00	0.00	0.00	40.50	0.00	0.00	0.00	40.50
CHILD SUPPT-	0.00	0.00	0.00	0.00	0.00	605.00	0.00	0.00	0.00	605.00
DIVERS 457%-	0.00	0.00	0.00	0.00	0.00	471.79	0.00	0.00	0.00	471.79
PRIN 457% -	0.00	0.00	0.00	0.00	0.00	119.06	0.00	0.00	0.00	119.06
PRIN LOAN -	0.00	0.00	0.00	0.00	0.00	391.16	0.00	0.00	0.00	391.16
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	770.00	0.00	0.00	0.00	770.00
I.M.R.F -	0.00	0.00	0.00	0.00	221.58	91.23	0.00	0.00	221.58	91.23
FIRE PENSIO-	0.00	0.00	0.00	0.00	0.00	15029.83	0.00	0.00	0.00	15029.83
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	482.06	0.00	0.00	0.00	482.06
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	18.67	0.00	0.00	0.00	18.67
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	269.36	0.00	0.00	0.00	269.36
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADDITIO-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADD PRE-	0.00	0.00	0.00	0.00	0.00	223.33	0.00	0.00	0.00	223.33
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	160007.31	24585.92	0.00	0.00	160007.31	24585.92
STATE W/H -	0.00	0.00	0.00	0.00	160007.31	7803.27	0.00	0.00	160007.31	7803.27
FICA -	0.00	0.00	0.00	0.00	1977.30	122.59	0.00	0.00	1977.30	122.59
MEDICARE -	0.00	0.00	0.00	0.00	159213.34	2308.57	0.00	0.00	159213.34	2308.57
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -09 CIVIL DEFENSE										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -	0.00		0.00		0.00		0.00		0.00	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -11 SAFETY										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	2 CHECK(S)	0 CHECK(S)	2 CHECK(S)	0 CHECK(S)	2 CHECK(S)	2 CHECK(S)	
NET -	0.00	0.00	0.00	2760.28	0.00	0.00	0.00	2760.28		
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		4268.97		0.00		4268.97
SALARY -	0.00	0.00	0.00	0.00	173.32	4268.97	0.00	0.00	173.32	4268.97
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	0.00	0.00	2.56	2.54	0.00	0.00	2.56	2.54
IPPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	90.00	0.00	0.00	0.00	90.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	47.48	0.00	0.00	0.00	47.48
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	466.60	192.11	0.00	0.00	466.60	192.11
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	72.91	0.00	0.00	0.00	72.91
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	3813.95	501.52	0.00	0.00	3813.95	501.52
STATE W/H -	0.00	0.00	0.00	0.00	3813.95	188.79	0.00	0.00	3813.95	188.79
FICA -	0.00	0.00	0.00	0.00	4096.06	253.95	0.00	0.00	4096.06	253.95
MEDICARE -	0.00	0.00	0.00	0.00	4096.06	59.39	0.00	0.00	4096.06	59.39
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -12 BUILDING & ZONING										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		13 CHECK(S)		0 CHECK(S)		13 CHECK(S)	
NET -	0.00		0.00		14401.53		0.00		14401.53	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		21075.02		0.00		21075.02
SALARY -	0.00	0.00	0.00	0.00	866.60	18657.27	0.00	0.00	866.60	18657.27
HOURLY PAY -	0.00	0.00	0.00	0.00	151.00	2092.75	0.00	0.00	151.00	2092.75
WC ED -	0.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00	0.00	75.00
AUX COOR -	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
DECLINE -	0.00	0.00	0.00	0.00	0.00	150.00	0.00	0.00	0.00	150.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	250.00	0.00	0.00	0.00	250.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	50.00	0.00	0.00	0.00	50.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	33.29	0.00	0.00	0.00	33.29
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
ST FARM INS-	0.00	0.00	0.00	0.00	8.96	8.89	0.00	0.00	8.96	8.89
IPPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
PBPA LABOR -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	284.88	0.00	0.00	0.00	284.88
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	250.00	0.00	0.00	0.00	250.00
I.M.R.F -	0.00	0.00	0.00	0.00	2270.26	934.71	0.00	0.00	2270.26	934.71
POL PENSION-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	29.18	0.00	0.00	0.00	29.18
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	19615.31	2227.43	0.00	0.00	19615.31	2227.43
STATE W/H -	0.00	0.00	0.00	0.00	19615.31	961.99	0.00	0.00	19615.31	961.99
FICA -	0.00	0.00	0.00	0.00	20825.02	1291.14	0.00	0.00	20825.02	1291.14
MEDICARE -	0.00	0.00	0.00	0.00	20825.02	301.98	0.00	0.00	20825.02	301.98
ETC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -13 PUBLIC WORKS										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	29 CHECK(S)	0 CHECK(S)	0 CHECK(S)	29 CHECK(S)			
NET -	0.00	0.00	0.00	48812.49	0.00	0.00	48812.49			
EARNINGS										
GROSS -	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
SALARY -	0.00	0.00	0.00	0.00	2513.15	69929.16	0.00	0.00	2513.15	69929.16
OVERTIME PA-	0.00	0.00	0.00	0.00	4.00	168.06	0.00	0.00	4.00	168.06
CALL OUT -	0.00	0.00	0.00	0.00	139.00	5970.16	0.00	0.00	139.00	5970.16
RANK DIFF -	0.00	0.00	0.00	0.00	48.00	26.00	0.00	0.00	48.00	26.00
CDL LIC -	0.00	0.00	0.00	0.00	80.00	40.00	0.00	0.00	80.00	40.00
SHIF/DIF2 -	0.00	0.00	0.00	0.00	88.00	13.20	0.00	0.00	88.00	13.20
DEDUCTIONS										
ST FARM INS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
IPPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	100.00	0.00	0.00	0.00	100.00
TEAMSTERS52-	0.00	0.00	0.00	0.00	0.00	1007.00	0.00	0.00	0.00	1007.00
LABORER 397-	0.00	0.00	0.00	0.00	0.00	598.00	0.00	0.00	0.00	598.00
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD SUPPT-	0.00	0.00	0.00	0.00	0.00	712.20	0.00	0.00	0.00	712.20
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	130.00	0.00	0.00	0.00	130.00
I.M.R.F -	0.00	0.00	0.00	0.00	8322.82	3426.62	0.00	0.00	8322.82	3426.62
PAINTER DUE-	0.00	0.00	0.00	0.00	0.00	95.84	0.00	0.00	0.00	95.84
VOL ADD CON-	0.00	0.00	0.00	0.00	0.00	487.97	0.00	0.00	0.00	487.97
2%-LABOR -	0.00	0.00	0.00	0.00	0.00	668.60	0.00	0.00	0.00	668.60
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PNTRS ADMIN-	0.00	0.00	0.00	0.00	0.00	4.34	0.00	0.00	0.00	4.34
TAXES										
FEDERAL W/H-	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
STATE W/H -	0.00	0.00	0.00	0.00	72489.96	10688.74	0.00	0.00	72489.96	10688.74
FICA -	0.00	0.00	0.00	0.00	72489.96	3571.78	0.00	0.00	72489.96	3571.78
MEDICARE -	0.00	0.00	0.00	0.00	76146.58	4721.10	0.00	0.00	76146.58	4721.10
EIC CREDIT -	0.00	0.00	0.00	0.00	76146.58	1104.12	0.00	0.00	76146.58	1104.12
						0.00				0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -14 ** INVALID DEPT **										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)		0 CHECK(S)	
NET -	0.00		0.00		0.00		0.00		0.00	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 10 -23 SUMMER PART-TIME HEL										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		20 CHECK(S)		0 CHECK(S)		20 CHECK(S)	
NET -	0.00		0.00		6181.61		0.00		6181.61	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		7812.00		0.00		7812.00
HOURLY PAY -	0.00	0.00	0.00	0.00	868.00	7812.00	0.00	0.00	868.00	7812.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	7812.00	661.54	0.00	0.00	7812.00	661.54
STATE W/H -	0.00	0.00	0.00	0.00	7812.00	371.19	0.00	0.00	7812.00	371.19
FICA -	0.00	0.00	0.00	0.00	7812.00	484.37	0.00	0.00	7812.00	484.37
MEDICARE -	0.00	0.00	0.00	0.00	7812.00	113.29	0.00	0.00	7812.00	113.29
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 15 -01 CINEMA										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		13 CHECK(S)		0 CHECK(S)		13 CHECK(S)	
NET -	0.00		0.00		6640.44		0.00		6640.44	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		9231.77		0.00		9231.77
SALARY -	0.00	0.00	0.00	0.00	173.34	6829.27	0.00	0.00	173.34	6829.27
HOURLY PAY -	0.00	0.00	0.00	0.00	289.20	2402.50	0.00	0.00	289.20	2402.50
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	746.44	307.32	0.00	0.00	746.44	307.32
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	8899.45	1121.59	0.00	0.00	8899.45	1121.59
STATE W/H -	0.00	0.00	0.00	0.00	8899.45	433.12	0.00	0.00	8899.45	433.12
FICA -	0.00	0.00	0.00	0.00	9206.77	570.81	0.00	0.00	9206.77	570.81
MEDICARE -	0.00	0.00	0.00	0.00	9206.77	133.49	0.00	0.00	9206.77	133.49
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S										
DEPARTMENT: 30 -36 MOTOR FUEL FUND PROJ										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0 CHECK(S)	0.00
NET -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		0.00		0.00		0.00
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
STATE W/H -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
FICA -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MEDICARE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

DEPARTMENT TOTALS										
DEPARTMENT: 70 -55 PAYROLL										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
NBR CHECKS	0 CHECK(S)		0 CHECK(S)		31 CHECK(S)		0 CHECK(S)		31 CHECK(S)	
NET -	0.00		0.00		57126.52		0.00		57126.52	
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		89380.27		0.00		89380.27
SALARY -	0.00	0.00	0.00	0.00	2655.82	82728.11	0.00	0.00	2655.82	82728.11
OVERTIME PA-	0.00	0.00	0.00	0.00	82.00	3703.06	0.00	0.00	82.00	3703.06
CALL OUT -	0.00	0.00	0.00	0.00	16.00	755.76	0.00	0.00	16.00	755.76
RANK DIFF -	0.00	0.00	0.00	0.00	264.00	573.20	0.00	0.00	264.00	573.20
SHIF/DIFF2 -	0.00	0.00	0.00	0.00	230.60	92.24	0.00	0.00	230.60	92.24
SHIF/DIFF3 -	0.00	0.00	0.00	0.00	335.50	251.63	0.00	0.00	335.50	251.63
SUN PREM -	0.00	0.00	0.00	0.00	103.60	148.12	0.00	0.00	103.60	148.12
LIC CERT -	0.00	0.00	0.00	0.00	0.00	583.44	0.00	0.00	0.00	583.44
DECLINE -	0.00	0.00	0.00	0.00	0.00	300.00	0.00	0.00	0.00	300.00
CLOTHING -	0.00	0.00	0.00	0.00	0.00	225.00	0.00	0.00	0.00	225.00
NO PAY -	0.00	0.00	0.00	0.00	0.40	10.48-	0.00	0.00	0.40	10.48-
RETRO--REG -	0.00	0.00	0.00	0.00	0.00	30.19	0.00	0.00	0.00	30.19
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
H.S.A -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	1050.00	0.00	0.00	0.00	1050.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	200.00	0.00	0.00	0.00	200.00
HLTH SNG AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FML AF-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	93.58	0.00	0.00	0.00	93.58
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	102.85	0.00	0.00	0.00	102.85
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	79.58	0.00	0.00	0.00	79.58
ST FARM INS-	0.00	0.00	0.00	0.00	28.16	27.94	0.00	0.00	28.16	27.94
IPPPA 457 P-	0.00	0.00	0.00	0.00	0.00	465.00	0.00	0.00	0.00	465.00
ENG LOCAL39-	0.00	0.00	0.00	0.00	0.00	2125.25	0.00	0.00	0.00	2125.25
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHILD SUPPT-	0.00	0.00	0.00	0.00	0.00	378.42	0.00	0.00	0.00	378.42
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IL LEVY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	686.00	0.00	0.00	0.00	686.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRIN 457% -	0.00	0.00	0.00	0.00	0.00	175.60	0.00	0.00	0.00	175.60
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	75.00	0.00	0.00	0.00	75.00
MISC -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	9769.25	4022.09	0.00	0.00	9769.25	4022.09
VOL ADD CON-	0.00	0.00	0.00	0.00	0.00	245.84	0.00	0.00	0.00	245.84
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	134.99	0.00	0.00	0.00	134.99
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	74.85	0.00	0.00	0.00	74.85
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IMRF V.A.C -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TAXABLE	TAX		TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX

8/11/2017 1:23 PM

PAYROLL HISTORY REPORT

PAGE: 19

PAYROLL NO#: 01 - City of Granite City

SORTED BY DEPARTMENT

DATE: 8/01/2017 THRU 8/15/2017

TAXES

FEDERAL W/H-	0.00	0.00	0.00	0.00	83392.58	11529.58	0.00	0.00	83392.58	11529.58
STATE W/H -	0.00	0.00	0.00	0.00	83392.58	4045.19	0.00	0.00	83392.58	4045.19
FICA -	0.00	0.00	0.00	0.00	88130.27	5464.08	0.00	0.00	88130.27	5464.08
MEDICARE -	0.00	0.00	0.00	0.00	88130.27	1277.91	0.00	0.00	88130.27	1277.91
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

D E P A R T M E N T T O T A L S										
DEPARTMENT: 71 -30 INDUSTRIAL PRETREATM										
1ST - QUARTER TOTALS			2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **	
0 CHECK(S)			0 CHECK(S)		1 CHECK(S)		0 CHECK(S)		1 CHECK(S)	
NBR CHECKS -										
NET -		0.00		0.00		1601.07		0.00		1601.07
EARNINGS	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT
GROSS -		0.00		0.00		2755.02		0.00		2755.02
SALARY -	0.00	0.00	0.00	0.00	86.66	2705.82	0.00	0.00	86.66	2705.82
LIC CERT -	0.00	0.00	0.00	0.00	0.00	49.20	0.00	0.00	0.00	49.20
DEDUCTIONS	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT
OPTUM FUNDI	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH FAM PR-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
HLTH SNG PR-	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
ST FARM INS-	0.00	0.00	0.00	0.00	1.28	1.27	0.00	0.00	1.28	1.27
IPPFA 457 P-	0.00	0.00	0.00	0.00	0.00	200.00	0.00	0.00	0.00	200.00
ENG LOCAL39-	0.00	0.00	0.00	0.00	0.00	75.75	0.00	0.00	0.00	75.75
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	301.12	123.98	0.00	0.00	301.12	123.98
TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	2406.04	400.00	0.00	0.00	2406.04	400.00
STATE W/H -	0.00	0.00	0.00	0.00	2406.04	119.10	0.00	0.00	2406.04	119.10
FICA -	0.00	0.00	0.00	0.00	2730.02	169.26	0.00	0.00	2730.02	169.26
MEDICARE -	0.00	0.00	0.00	0.00	2730.02	39.59	0.00	0.00	2730.02	39.59
EIC CREDIT -		0.00		0.00		0.00		0.00		0.00

R E P O R T T O T A L S										
1ST - QUARTER TOTALS		2ND - QUARTER TOTALS		3RD - QUARTER TOTALS		4TH - QUARTER TOTALS		** TOTAL **		
NBR CHECKS -	0 CHECK(S)		0 CHECK(S)		266 CHECK(S)		0 CHECK(S)		266 CHECK(S)	
NET -	0.00		0.00		414067.50		0.00		414067.50	
EARNINGS		HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	HOURS	AMOUNT	
GROSS -		0.00	0.00		0.00	658125.87		0.00	0.00	658125.87
SALARY -	0.00	0.00		0.00	0.00	19788.39	582633.38	0.00	0.00	19788.39 582633.38
HOURLY PAY -	0.00	0.00		0.00	0.00	1308.20	12307.25	0.00	0.00	1308.20 12307.25
SHORT/CHG -	0.00	0.00		0.00	0.00	12.00	274.26	0.00	0.00	12.00 274.26
REIM OT -	0.00	0.00		0.00	0.00	45.50	2341.44	0.00	0.00	45.50 2341.44
TIF ADMIN -	0.00	0.00		0.00	0.00	0.00	500.00	0.00	0.00	0.00 500.00
OVERTIME PA-	0.00	0.00		0.00	0.00	211.50	9534.00	0.00	0.00	211.50 9534.00
COURT TIME -	0.00	0.00		0.00	0.00	5.00	335.58	0.00	0.00	5.00 335.58
CALL OUT -	0.00	0.00		0.00	0.00	280.25	12040.81	0.00	0.00	280.25 12040.81
C O R -	0.00	0.00		0.00	0.00	94.00	4230.00	0.00	0.00	94.00 4230.00
RANK DIFF -	0.00	0.00		0.00	0.00	2112.00	4370.00	0.00	0.00	2112.00 4370.00
SHIF/DIFF2 -	0.00	0.00		0.00	0.00	230.60	92.24	0.00	0.00	230.60 92.24
SHIF/DIFF3 -	0.00	0.00		0.00	0.00	335.50	251.63	0.00	0.00	335.50 251.63
CDL LIC -	0.00	0.00		0.00	0.00	80.00	40.00	0.00	0.00	80.00 40.00
DISPATCH 2 -	0.00	0.00		0.00	0.00	344.00	344.00	0.00	0.00	344.00 344.00
SHIF/DIF2 -	0.00	0.00		0.00	0.00	88.00	13.20	0.00	0.00	88.00 13.20
SUN PREM -	0.00	0.00		0.00	0.00	103.60	148.12	0.00	0.00	103.60 148.12
SHIF/DIFF3 -	0.00	0.00		0.00	0.00	1147.00	745.55	0.00	0.00	1147.00 745.55
LIC CERT -	0.00	0.00		0.00	0.00	0.00	632.64	0.00	0.00	0.00 632.64
WC ED -	0.00	0.00		0.00	0.00	0.00	475.00	0.00	0.00	0.00 475.00
INJURED -	0.00	0.00		0.00	0.00	0.00	178.72-	0.00	0.00	0.00 178.72-
EMA COOR -	0.00	0.00		0.00	0.00	0.00	500.00	0.00	0.00	0.00 500.00
AUX COOR -	0.00	0.00		0.00	0.00	0.00	100.00	0.00	0.00	0.00 100.00
DECLINE -	0.00	0.00		0.00	0.00	0.00	1800.00	0.00	0.00	0.00 1800.00
SICK--CASH -	0.00	0.00		0.00	0.00	348.00	15175.24	0.00	0.00	348.00 15175.24
VAC - CASH -	0.00	0.00		0.00	0.00	164.00	7151.55	0.00	0.00	164.00 7151.55
CLOTHING -	0.00	0.00		0.00	0.00	0.00	225.00	0.00	0.00	0.00 225.00
NO PAY -	0.00	0.00		0.00	0.00	0.40	10.48-	0.00	0.00	0.40 10.48-
RETRO--REG -	0.00	0.00		0.00	0.00	0.00	143.17	0.00	0.00	0.00 143.17
MILITARY LV-	0.00	0.00		0.00	0.00	0.00	1121.32-	0.00	0.00	0.00 1121.32-
COMP PAY -	0.00	0.00		0.00	0.00	30.00	1962.33	0.00	0.00	30.00 1962.33
TUTION FR -	0.00	0.00		0.00	0.00	0.00	1000.00	0.00	0.00	0.00 1000.00
CELL -	0.00	0.00		0.00	0.00	0.00	70.00	0.00	0.00	0.00 70.00
DEDUCTIONS		EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	EMPLOYER	DEDUCT	
UMB FUNDING	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00
OPTUM FUNDI-	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00
H.S.A -	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00
HLTH FAM PR-	0.00	0.00		0.00	0.00	0.00	3950.00	0.00	0.00	0.00 3950.00
HLTH SNG PR-	0.00	0.00		0.00	0.00	0.00	500.00	0.00	0.00	0.00 500.00
HLTH SNG AF-	0.00	0.00		0.00	0.00	0.00	175.00	0.00	0.00	0.00 175.00
HLTH FML AF-	0.00	0.00		0.00	0.00	0.00	350.00	0.00	0.00	0.00 350.00
PBPA CHIEF -	0.00	0.00		0.00	0.00	0.00	60.00	0.00	0.00	0.00 60.00
LOAN PAYMEN-	0.00	0.00		0.00	0.00	0.00	1489.34	0.00	0.00	0.00 1489.34
LOAN PAYMEN-	0.00	0.00		0.00	0.00	0.00	734.00	0.00	0.00	0.00 734.00
LOAN PAYMEN-	0.00	0.00		0.00	0.00	0.00	111.68	0.00	0.00	0.00 111.68
ST FARM INS-	0.00	0.00		0.00	0.00	171.52	170.18	0.00	0.00	171.52 170.18
IPPPA 457 P-	0.00	0.00		0.00	0.00	0.00	29252.42	0.00	0.00	0.00 29252.42
RELIEF & WE-	0.00	0.00		0.00	0.00	0.00	0.00	0.00	0.00	0.00 0.00
ENG LOCAL39-	0.00	0.00		0.00	0.00	0.00	2201.00	0.00	0.00	0.00 2201.00

PBPA LABOR -	0.00	0.00	0.00	0.00	0.00	2646.00	0.00	0.00	0.00	2646.00
AFSCME 31 -	0.00	0.00	0.00	0.00	0.00	1187.00	0.00	0.00	0.00	1187.00
TEAMSTERS52-	0.00	0.00	0.00	0.00	0.00	1007.00	0.00	0.00	0.00	1007.00
LABORER 397-	0.00	0.00	0.00	0.00	0.00	598.00	0.00	0.00	0.00	598.00
UNITED WAY -	0.00	0.00	0.00	0.00	0.00	454.13	0.00	0.00	0.00	454.13
FRINGE BFTS-	0.00	0.00	0.00	0.00	0.00	1070.00	0.00	0.00	0.00	1070.00
BAS 125 PLA-	0.00	0.00	0.00	0.00	0.00	108.33	0.00	0.00	0.00	108.33
POLICE/FIRE-	0.00	0.00	0.00	0.00	0.00	1126.67	0.00	0.00	0.00	1126.67
RELIEF&WEL2-	0.00	0.00	0.00	0.00	0.00	60.00	0.00	0.00	0.00	60.00
253 FIRE PA-	0.00	0.00	0.00	0.00	0.00	196.00	0.00	0.00	0.00	196.00
ADD FIRE PA-	0.00	0.00	0.00	0.00	0.00	40.50	0.00	0.00	0.00	40.50
CHILD SUPPT-	0.00	0.00	0.00	0.00	0.00	3533.63	0.00	0.00	0.00	3533.63
DIVERS 457%-	0.00	0.00	0.00	0.00	0.00	1448.33	0.00	0.00	0.00	1448.33
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
IL LEVY -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARN FEE -	0.00	0.00	0.00	0.00	0.00	9.82	0.00	0.00	0.00	9.82
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	45.54	0.00	0.00	0.00	45.54
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
CHAPTER 13 -	0.00	0.00	0.00	0.00	0.00	686.00	0.00	0.00	0.00	686.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
GARNISHMENT-	0.00	0.00	0.00	0.00	0.00	445.18	0.00	0.00	0.00	445.18
PRIN 457% -	0.00	0.00	0.00	0.00	0.00	294.66	0.00	0.00	0.00	294.66
PRIN LOAN -	0.00	0.00	0.00	0.00	0.00	448.84	0.00	0.00	0.00	448.84
LOAN PYMT -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PRINCIPAL -	0.00	0.00	0.00	0.00	0.00	1840.00	0.00	0.00	0.00	1840.00
MISC -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
I.M.R.F -	0.00	0.00	0.00	0.00	29551.96	12166.93	0.00	0.00	29551.96	12166.93
POL PENSION-	0.00	0.00	0.00	0.00	0.00	16569.31	0.00	0.00	0.00	16569.31
FIRE PENSIO-	0.00	0.00	0.00	0.00	0.00	15029.83	0.00	0.00	0.00	15029.83
PAINTER DUE-	0.00	0.00	0.00	0.00	0.00	95.84	0.00	0.00	0.00	95.84
VOL ADD CON-	0.00	0.00	0.00	0.00	0.00	837.98	0.00	0.00	0.00	837.98
HSA FUND -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2%-LABOR -	0.00	0.00	0.00	0.00	0.00	668.60	0.00	0.00	0.00	668.60
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	935.36	0.00	0.00	0.00	935.36
MELLON ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
OPTUM ADD -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	316.58	0.00	0.00	0.00	316.58
LOAN PAYMEN-	0.00	0.00	0.00	0.00	0.00	405.74	0.00	0.00	0.00	405.74
REIMBURSE -	0.00	0.00	0.00	0.00	0.00	25.00	0.00	0.00	0.00	25.00
UMB ADDITIO-	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
UMB ADD PRE-	0.00	0.00	0.00	0.00	0.00	223.33	0.00	0.00	0.00	223.33
IMRF V.A.C -	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
PNTRS ADMIN-	0.00	0.00	0.00	0.00	0.00	4.34	0.00	0.00	0.00	4.34

TAXES	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX	TAXABLE	TAX
FEDERAL W/H-	0.00	0.00	0.00	0.00	590837.20	85087.76	0.00	0.00	590837.20	85087.76
STATE W/H -	0.00	0.00	0.00	0.00	590837.20	28913.95	0.00	0.00	590837.20	28913.95
FICA -	0.00	0.00	0.00	0.00	283179.01	17557.12	0.00	0.00	283179.01	17557.12
MEDICARE -	0.00	0.00	0.00	0.00	619408.18	8981.45	0.00	0.00	619408.18	8981.45

